Student Leadership Award Form

California Dental Hygienists' Association
The Voice of Dental Hygiene

Please use the following criteria for the selection of the student who receives this award:

- The student is a graduating senior dental hygiene student in a California Dental Hygiene Program
- The student has made outstanding contributions toward the Association in more than one area, whether it is on the national, state or local level

The recipient of this special award is selected through a vote of the senior dental hygiene students, by means of a secret ballot. The ballots are to be counted by the Junior Student Membership Representative and the Student Membership Faculty Advisor.

Recipients will receive a certificate commemorating their achievement.

Certificate Information		
Date of Presentation/Graduation:		
Dental Hygiene Program:		
Student Leadership Award Recipient Name:		
Nominee holds an active CDHA Student membership:	Yes ☐ No ☐	
Please provide a few comments about the recipient and their leadership role.		
The student will be attending HOD.	Yes ☐ No ☐ Unknown ☐	
Will the school present the award to the student?	Yes ☐ No ☐	
Would you like the award presented to the student at a CDHA event? If yes, please indicate the event name.	Yes ☐ CDHA Event:	No ☐

Mailing Information Please provide the following on where the framed certificate should be mailed:			
Contact Name:			
School Name:			
Mailing Address:			
City:		**State:**	**Zip Code:**
Phone:			
Email:			

Submitted by:	
School Name:	
Program Director:	

To ensure timely processing, this form must be submitted to CDHA at least 14 business days before the award presentation. Please note: CDHA does not mail certificates. A PDF version will be provided for faculty to print.

Please submit your completed form via email to memberservices@cdha.org.

For office use only: Membership verified _____ Date certificate mailed _____