

## 2019 HSA OF THE YEAR AWARD

The Health and Safety Administrator (HSA) of the Year Award recognizes a safety professional who has worked hard toward building their safety career in construction through the administration and management of projects and initiatives and also through extracurricular activities such as training and volunteering.

By shining a spotlight on these safety leaders, we share their efforts with the industry in making Saskatchewan the safest construction environment in Canada.

### Eligibility:

- All certifications are current and have not expired.
- Auditor certificate is current and one personal audit has been submitted in the last (3) years
- Have achieved HSA Certification through the SCSA.

### Conditions: \*Note the following important conditions of nomination\*

- Each criterion must be addressed in the nomination.
- Nominees are strongly advised to include supporting material/evidence with their submission.
- Self-nominations are not permitted.
- Be available for a follow-up call in March.

**Please submit all nominations to [awards@scsaonline.ca](mailto:awards@scsaonline.ca) by Thursday, February 28, 2019.**

## 2019 HSA of the Year Award Nomination Form

Name of Nominee: \_\_\_\_\_

Position: \_\_\_\_\_

Company: \_\_\_\_\_

Name of contact person or the person nominating: \_\_\_\_\_

Position: \_\_\_\_\_

Company: \_\_\_\_\_

Region: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: \_\_\_\_\_

1. Describe your relationship with the person you are nominating:

---

---

2. Briefly describe his/her approach to safety:

---

---

3. Give an example of his/her dedication to health and safety:

---

---

“Constructing Safety Leadership”

4. How has he/she earned the respect of their coworkers when enforcing safety at work?

---

---

---

5. List any extracurricular activities he/she has undertaken to further their safety career:

---

---

---

6. Provide an example of a project or initiative the nominee was involved in that improved safety in the workplace or community. Please provide examples and figures if possible:

---

---

---

Thank you for completing this nomination for the HSA of the Year Award.

**Permission:**

In the interest of sharing corporate knowledge, I give permission for the key points of my nomination to be shared publicly should the nominee win.

- Yes
- No