



OSSMA STAR Awards Entry Form

Important!! The OSSMA STAR Awards have specific additional information that must be included with this form. Entries that do not meet all the submission requirements will be automatically disqualified. Entries must be emailed by **February 1**.

General Information

Fill in the information below. This entry is submitted by:

Name of Submitter or Nominator (Must be and AAAMA Member)

OSSMA Chapter Name/ Officer title

Street Address

City/State/ZIP

Day Phone

Evening Phone

Email

Entry Categories

Use a separate form for each submission. You may save or photocopy this form. Check only one category per form.

Excellence in Publishing

Title of Newsletter

Editor's Name, Including Credentials

Frequency of Newsletter

- Two awards will be given one for publications more than 2 pages and one for publications under 2 pages.

Awards of Distinction

Medical Assistant of the Year

Educator of the Year

Mentor of the Year

Nominee Name, Including Credentials (Must be a current CMA(AAMA) and AAMA Member)

Nominee's Street Address

City/State/ZIP

Day Phone

Evening Phone

Along with the entry form, include the following for each Award of Distinction entry:

- Detailed statement of accomplishments
- Nominee's professional and AAMA Resume
- Letters of recommendation (minimum of two)

Email Entries: Type the nominee name in the subject line. Attach this completed form and all required submission materials and send to vicepresident@ossma.org.

Deadline

Entries must be emailed by **February 1**