



Continue with application

☐ YES



## **Heroism Award Application**

Completed Applications Due: Friday March 31, by 5:00 p.m.

## This page must be complete and in front of the first tab in your application binder

Has your company experienced an occupational-related fatality event involving an employee(s) of your company during 2015 and 2016?

Stop here! Your company is ineligible to apply for this year's award.

If your company has a fatality involving a company employee after submitting this application but prior to the Safety Awards of Excellence event in May 2017, you must notify AGC Florida East Coast Chapter. Your com-

pany will not be eligible for an award.  Company Information	
Company Name:	Primary Contact Person:
Address:	Title:
City:	Phone:
State:	Fax:
Zip Code:	Email:
Company President/CEO Name:	President/CEO Signature:
Safety Director Name:	Safety Director Signature:

## **Award Requirements**

This award is available for someone who needs to be recognized for an act of heroism on the job or in the community. On a separate sheet of paper please share your heroism story.

## **Application**

- 1. Narrative description.
- 2. Include media if applicable.