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##  OUTSTANDING BOOK AWARD

 *Please fill in the form below, clicking on the option boxes where these are provided.*

Name of Book:

Publisher of Book:

Year of Publication:

Author/s and University Affiliations (one or more authors must be ISATT Members):

1.
2.
3.
4.
5.
6.

ISATT Member/s? Yes [ ]  No [ ]

5 copies of book shipped English Translation

to Daniela Hotolean: [ ]  if applicable: [ ]

Nominator:

(no self nominations, please)

ISATT Region:       Members: [ ]

Address:

Telephone:       Email:

200 word summary (for award announcement purposes, if selected)

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Nominator’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_