

Fellow Nomination Criteria



FELLOW OF LIA

Objective

The grade of Fellow is the highest level of membership in the LIA. It is awarded to recognize members of the institute who have:

- 1) attained unusual professional distinction in the LIA mission areas of laser science and technology, laser applications and/or laser safety, and
- 2) provided outstanding service to their field.

Guide

Both professional distinction and service are required qualifications, although professional distinction is the more important of the two. Service contributions alone will not be sufficient justification. In the professional category, technical papers published, technical work done, and technical or management positions held must relate to one of the LIA mission areas.

The rank of Fellow may be occasionally presented posthumously to a member of outstanding past accomplishment. In such cases, the criteria for acceptance shall be identical to other Fellow nominations.

Criteria

- 1) Professional accomplishments in one or both of the following areas:
 - a) Management - Has achieved significant or pattern-setting accomplishments in a management position in a business related to LIA mission areas.
 - b) Technical - Has made exceptional, documented technical contributions in a field relating to the LIA mission areas.

AND/OR

- 2) Service to the fields of lasers, lasers applications or laser safety in one or more of the following categories:
 - a) LIA Service - Has volunteered significant, extended effort on behalf of LIA. The office of president of LIA is sufficient to meet the entire service requirement. Other LIA offices and service must generally be augmented with additional activities.
 - b) Interdisciplinary Activity - Has been active with other groups related to LIA mission areas.
 - c) Publication and Promotional Activity - Has published, promoted or disseminated information relating to the LIA mission areas through any medium, including magazines, newspapers, television, industry and government standards and educational forums.

Eligibility

The candidate has to satisfy the following criteria:

- 1) must have practiced the profession of laser science and engineering in academia, medicine, industry or government for at least 10 years, and
- 2) fellow membership for any individual shall not be instituted or remain in effect unless his/her membership is current.
- 3) for exceptional candidates, the Executive Committee may waive the eligibility requirements.

Nomination Procedure:

- 1) Any LIA member can nominate.
- 2) The nomination must be endorsed by at least three LIA Fellows (which may include the nominator).
- 3) Only 1 (one) of the 3 (three) sponsors, nominator included, may be from the same institution as the nominee.
- 4) The nominator must document the contributions of the nominee in a format prescribed by LIA.

Fellow Nomination Form

FELLOW NOMINATION

Candidate's Name: _____

Candidate's Company Affiliation: _____

Candidate's Email: _____

Candidate's Telephone: _____

Comments: _____

NOMINATED BY

Name: _____ Company Affiliation: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Country: _____

Telephone: _____ Email: _____

Fellow Nomination Form

FIRST SPONSOR

Name 1: _____

Telephone 1: _____

Email 1: _____

SECOND SPONSOR

Name 2: _____

Telephone 2: _____

Email 2: _____

THIRD SPONSOR

Name 3: _____

Telephone 3: _____

Email 3: _____

PLEASE EMAIL, FAX or MAIL YOUR COMPLETED FORM TO:

+1.407.380.1553 | nominations@lia.org | fax: +1.407.380.5588
13501 Ingenuity Drive, Suite 128, Orlando, FL 32826

Fellow Reference Form



You are being asked to serve as a supporting sponsor for the candidate below who is being nominated as a Fellow of the Laser Institute of America (LIA). Your assistance in evaluating this nomination is appreciated.

PRIVILEGED INFORMATION:

Candidate's Name: _____

How long have you known the candidate or have known of her/his professional activity.

Time In Years: _____

Areas in which you feel the candidate has made major contributions to the LIA and the laser community: *(Check all that apply)*

- Education
- Research
- Business
- Other: _____

Your assessment of the candidate's qualification:

- Exceptionally Well Qualified
- Well Qualified
- Marginally Qualified
- Not Qualified

Comments: _____

SUBMITTED BY:

Name: _____ Company Affiliation: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Country: _____

Telephone: _____ Email: _____

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