

SWANA – Georgia Chapter AWARDS APPLICATION FORM for Solid Waste Programs

Program/Facility Nominated:

Category (*select only one*): Collection System Landfill Management Landfill Reuse Communication
 Education Recycling Transfer Station Composting Landfill Gas Control Landfill Gas Utilization
 Waste-to-Energy Marketing Integrated Solid Waste Management Systems Special Waste

Contact Person Name & Title:

Address:

City, State, Zip/ Province, Postal Code:

Phone #: _____ **Fax #:** _____

Email: _____

Application submitted by (*if different than information listed above*):

Name: _____ **Phone #:** _____

Email: _____

If selected for an award, how would you like the name of the organization to read on the award (limit of 50 characters)?

Application Checklist (Please make sure the following items are included in your submittal packet):

- ✓ Award Application Form (This Form)
- ✓ Entry meeting the SWANA National application requirements for the category selected (www.swana.org).
- ✓ **There is NO APPLICATION FEE for Georgia Chapter Award Submittals.**
- ✓ Entries shall consist of **ONE** electronic copy of your application in a pdf format.
- ✓ Applications should be mailed to:

SWANA – Georgia Chapter
ATTN: Stephanie Hubbard
823 Prada Court
Lawrenceville, GA 30043

email: georgiaswana@gmail.com
phone: (770) 822-9308

Release Statement: *I certify that the information provided in this application is accurate and correct to the best of my knowledge. SWANA – Georgia Chapter reserves the right to publish the enclosed information. Nominations become the property of SWANA – Georgia Chapter. My signature gives SWANA the right to reprint or make available for purchase any portion of this submittal.*

Signature: _____ **Date:** _____

All Entries Must Be Postmarked by August 31st.

For your convenience, an electronic version of this form may be downloaded at www.gaswana.org