PSHA STUDENT AWARD NSSLHA CHAPTER HONORS

Contact Informatio	n:	
Name of Chapter: _		
Contact Name:		
University Address:	(University Name, Street Address)	
	(City, State, Zip)	
Email Address:		

CHAPTER HONORS

Attach a statement indicating your reason(s) for nominating your chapter (please limit statements to no more than 500 words). State the activities and/or contributions that you believe make your NSSLHA chapter qualified to receive this honor. Remember that PSHA emphasizes services to the Community, profession, and organization (PSHA). You may want to include: community service contribution (s), chapter outreach, innovative ideas, and fundraising efforts.

Complete and return the above Student Awards applications and statements by Wednesday, February 14, 2024, to the PSHA Office. (Applications received after the submission deadline will not be considered).

PSHA Office 700 McKnight Park Drive, Suite 708 Pittsburgh, PA 15237 Fax: 412-366-8804 For questions email the PSHA Office, psha@psha.org