

OREGON PRIMA

ANNUAL ACHIEVEMENT IN RISK MANAGEMENT APPLICATION

Nominee's Entity/Organization: _____

Contact name: _____

Contact Email: _____

Is anyone associated with the entity a member of Oregon PRIMA? _____

Describe the Program or Person which has made a significant achievement in Risk Management below:

Describe the member(s) responsible (include responsibility, background and/or any other relevant information):

Nominating person: _____