



## CAL SMACNA Tom Guilfooy Memorial Craftsmanship of the Year Award APPLICATION FORM

***\*\*Please refer to the attached checklist  
when submitting your application.***

Category     Mechanical                       Architectural

Project: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Project Submission Criteria:** This award is for any project where attention to detail and expertise was critical to the project and exemplifies teamwork between sheet metal workers and the contractor and the contractor and owner.

The project must have been **completed within the 2017 calendar year**. You must possess a valid C20 or C43 contractor's license and be a member in good standing of CAL SMACNA. The award is for a project you designed and/or fabricated and installed. You may enter more than one project.

Power Point presentations with pictures and slide detail of the work performed is extremely helpful in judging entries. Please **include two** Power Point presentations of your submission (one with company identified; one **without** identification for blind judging). We also require a high resolution overall photo of the project along with four high resolution detail photos. These may be submitted on a DVD, flash drive or online web interface. ***Entries without the high resolution photos will not be considered.***

**Project Name:** \_\_\_\_\_

**Date Project Completed:** \_\_\_\_\_

**Type of Project:** \_\_\_\_\_

**Architectural Entries, Type of Metal Used:** \_\_\_\_\_

**Metal Purchased From:** \_\_\_\_\_

**Number of Man Hours Spent:** \_\_\_\_\_

**Identify Shop Fabrication and Sub-Fabrication:** \_\_\_\_\_

Designer of Project: \_\_\_\_\_

Identify Specific Items that are to be judged: \_\_\_\_\_

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**Other Judging Considerations: Please provide sufficient detail in your narrative to allow the Award Committee to understand the complexity and uniqueness of the project you are submitting for consideration. Please use a separate sheet.**

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Did any other SMACNA contractors work on this project:       YES     NO

If yes, please list here:

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**RETURN NO LATER THAN  
JANUARY 30, 2018**

CAL SMACNA, 1400 K Street, Suite 212  
Sacramento, CA 95814 Fax: (916) 363-7544  
Email: [team@cal-smacna.org](mailto:team@cal-smacna.org)

**To display all the entries at CAL SMACNA's annual convention, also submit a 2' x 3' foam core mounted photo of the project you are submitting containing your company information. Due to shipping to the convention site, we must have the foam core photos no later than February 26, 2018.**

**Project Submission Check List  
CAL SMACNA Tom Guilfooy Memorial  
Craftsmanship of the Year Award**

**Please place a check by each item submitted to CAL SMACNA  
for your project and return this along with your project submission.**

Thank you!

- Application form
- Power Point presentation (*with company identified*)
- Power Point presentation (*without company identification for judging purposes*)
- One high resolution overall project photo (*on DVD, flash drive or online web interface*)
- Four high resolution detail photos (*on DVD, flash drive or online web interface*)
- 2' x 3' foam core mounted project photo

*For office use only*

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*Date project received* \_\_\_\_\_

*All project materials received*    Yes    No

*Outstanding materials*

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