

Maurice “Mo” Mullet Lifetime of Service Award



The National Association of County and City Health Officials (NACCHO) **Mo Mullet Lifetime of Service Award** honors local health officials for noteworthy service that reflects Mullet’s commitment, vigor, and leadership.

Mo Mullet served on the NACCHO Board of Directors for three years, Vice President for four years, and President from 1992 to 1994. During his career, Mo achieved statewide and national recognition as a leader among local health officials and in the field of public health.

This award honors current or former local health officials for noteworthy service to NACCHO that has reflected the commitment, vigor, and leadership exemplified by Mo’s distinguished career.

Eligibility & Submission Requirements

- There is no application fee.
- The career of the recipient of this award will demonstrate the following achievements:
 - Leadership among local health departments demonstrated by energetic volunteer service to NACCHO.
 - Significant contributions to the field of local public health practice as a leader and representative of NACCHO.
 - Commitment, skill, and effort demonstrated on behalf of NACCHO.



How to Apply:

To submit your nomination for this award, please complete this four-page PDF application and email a copy, with any additional supportive materials, to membership@naccho.org.

The 2026 application period is open from Monday, December 15, 2025, to Thursday, January 22, 2026.

The deadline to submit is Thursday, January 22, 2026, at 11:59 PM EST.

The award recipient will be selected in the spring and recognized at the 2026 NACCHO360 conference, July 14-17 in Louisville, KY.

FOR MORE INFORMATION, PLEASE CONTACT: membership@naccho.org | 877.533.1320

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1) First, tell us about you:

First Name:	
Last Name:	
Credentials:	
Job Title:	
Organization Name:	
Street Address:	
City:	
State:	
Zip:	
Phone:	
Email:	

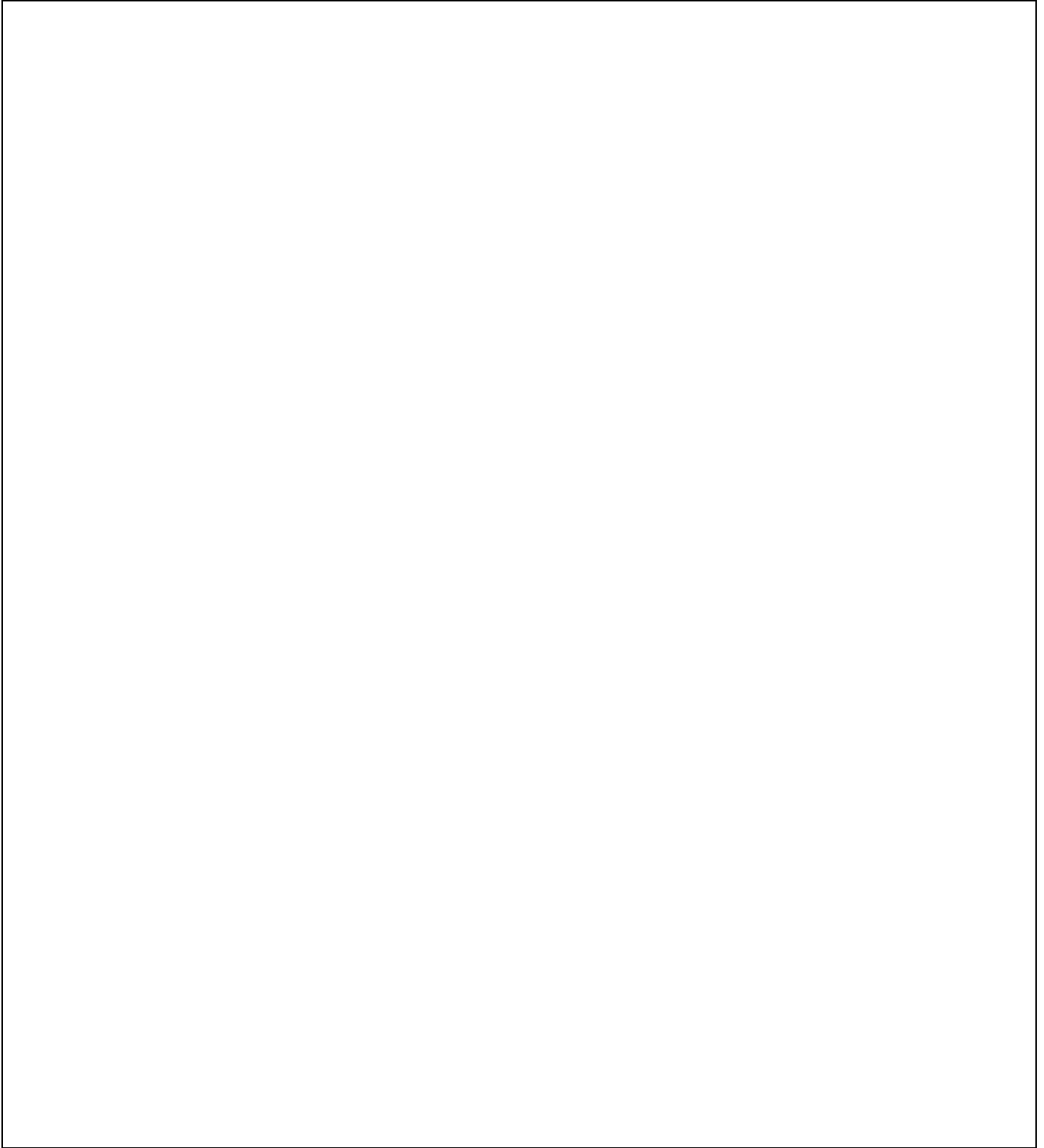
2) Now, tell us about the person/agency you are nominating:

First Name:	
Last Name:	
Credentials:	
Job Title:	
Organization Name:	
Street Address:	
City:	
State:	
Zip:	
Phone:	
Email:	

3) What is your relationship with the person you are nominating?

4) Description of professional qualities and service to local, state, and national public health work:

5) Description of major contributions to the community and fields of public health:

A large, empty rectangular box with a thin black border, intended for the applicant to describe their major contributions to the community and fields of public health.

6) Please attach any supporting documents to your application via email.