Department of Communications

Employee of the Year Nomination

Nominee Name:

 \_\_\_\_ Classified \_\_\_\_ Unclassified

Nominator Name:

Nominator Signature:

(signature required to validate nomination) Date

Please share with the committee why the person you are nominating should be the employee of the year. Give specific examples of how this person has exhibited the following qualities. Please keep responses to the space provided.

How does this nominee’s work impact the department and/or organization?

Interaction with co-workers, supervisors, administrators, etc.:

Interaction with clients/customers:

General attitude and demeanor:

Quality of work performed/productivity:

 Accomplishments and adaptability to circumstances:

Leadership:

Service contribution (committee work, community service, etc.):