



OUTSTANDING SERVICE AWARD REQUEST

Exceptional contribution to the College on a one-time basis

INSTRUCTIONS: Nominator and/or Supervisor will:

1. Complete this form together with appropriate attachments. If originating from another area, the form should be submitted through the nominee's immediate supervisor.
2. After review, sign and date the form.
3. Obtain supporting documentation from others concurring with the recommendation.
4. Forward to the Chief Human Resource Officer

Nominee: _____ Title: _____

Position Number: _____ Years of Service: _____

Recommended by: _____ Title: _____

Supervisors signature: _____ Date: _____

Concurring signature: _____ Date: _____
(optional)

Concurring signature: _____ Date: _____
(optional)



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State how normal expectations have been exceeded e.g., additional (same level) duties, quantity and quality, sustained period of time, cost savings, etc. (*Use additional sheets if more space is required.*)