

MONTGOMERY COLLEGE
TEAM EFFORT AWARD NOMINATION

AWARD INFORMATION

According to Procedure 38001CP–Recognition Awards, the purpose of the Team Effort Award is to recognize the skills and accomplishments of College community members who achieved the following by working as a team:

- (1) effectively shared the responsibilities;
- (2) successfully completed tasks;
- (3) interacted with each other to achieve specific goals and desired outcomes; and
- (4) collaborated with units internal and external to the College community.

This nomination form serves the role of the memorandum required to nominate a team.

Please note these criteria for the award, as delineated in 38001CP–Recognition Awards:

- (1) Project must be completed. Memoranda and supporting documents recommending the team award must be submitted to the President’s Executive [Cabinet] within ninety (90) days of the completion of the project.
- (2) Work for the project must be beyond the scope of the unit’s regular duties and responsibilities.
- (3) Project team members must demonstrate successful collaboration with units internal and/or external to the College community.
- (4) Contributions of each project team member must be briefly documented by the recommending official.

AWARD NOMINATION

Nominator’s Name: _____
Nominator’s Title: _____
Project Title: _____
Date Submitted: _____

1. Is the project completed? _____ YES _____ NO

2. When was the project completed (date)? _____

3. Was the work beyond the regular scope of the unit’s regular duties and responsibilities? _____ YES _____ NO

4. In 100 words or fewer, explain the importance of this project and how it benefitted Montgomery College, its students, its employees, and/or the community. Include examples of successful collaboration. (Space will expand as needed.) If appropriate, attach other supporting documentation about the project.

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5. In this table, list each team member alphabetically by last name and briefly document their contribution to the completion of the project. (Use pages 3 and 4 for additional names, if necessary.) Please assure that names are spelled correctly, as the recipient would want the name on a certificate.

	TITLE (Dr./Ms./Mr./other)	LAST NAME	FIRST NAME	JOB TITLE	CONTRIBUTION OF TEAM MEMBER
1.					
2.					
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OFFICIAL USE

PEC Recommendation: YES NO Date: _____
 President's Approval: YES NO Date: _____
 Certificates Prepared: _____ Date: _____

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	TITLE <small>(Dr./Ms./Mr./other)</small>	LAST NAME	FIRST NAME	JOB TITLE	CONTRIBUTION OF TEAM MEMBER
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	TITLE <i>(Dr./Ms./Mr./other)</i>	LAST NAME	FIRST NAME	JOB TITLE	CONTRIBUTION OF TEAM MEMBER
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