

NOMINATION FORM

Meritorious Service Award (Staff)

Date: _____

NOMINEE:

Name: _____

School/Program: _____

Position: _____

NOMINATORS:

1. Name: _____

Faculty Student Staff Alumnus (circle one)

Signature: _____

2. Name: _____

Faculty Student Staff Alumnus (circle one)

Signature: _____

3. Name: _____

Faculty Student Staff Alumnus (circle one)

Signature: _____

Supporting Documentation

Please attach: 1) Letter of Nomination (600-word maximum); 2) Letter of recommendation from the Supervisor; 3) Letters of support from at least three colleagues

Deadline for Nominations: April 30

Nomination forms and all supporting documentation should be submitted to:

Office of the Dean, Faculty of Health Sciences
Room 200 - Arthur and Sonia Labatt Health Sciences Building