Awards For Excellence
Nomination

Any permanent (SPA or EPA) employee categorized as administration or professional is eligible to be nominated for the University Award for Excellence. A written recommendation should be attached to this completed form and returned to the appropriate University Awards for Excellence selection committee. Please limit your written recommendation to two (2) pages (front and back of one page or front of each 2 pages). Nominees should have made major contributions reflecting credit on themselves and NC State service. The services or accomplishments must be so outstanding that special recognition is justified.

Qualifications for award recipients are:
- Must be a permanent NC State employee (SPA or EPA staff who do not hold faculty rank at either college or unit levels).
- Nominees must have no documented disciplinary actions against them within the preceding 18 months from date of issuance or have no active disciplinary actions pending.
- All nominations must be approved by the employee’s supervisor for submission.

Recommendations should address any of the following eligibility criteria that may apply:
1. **Outstanding Service**- Exhibited unselfish devotion to duty, far and above normal requirements.

2. **Innovations**- Initiated fruitful study and investigation or has successfully established new and outstanding methods, practices, plans or designs (such as pioneering or research and development work in administration, engineering, productivity, agriculture, medicine, natural resources, the social sciences, etc.).

3. **Public Service**- Has made outstanding contributions by participating in or implementing community and public service projects (such as volunteering with various non-profit organizations).

4. **Safety/Heroism**- Demonstrated outstanding judgment or courage in an emergency; or meritorious action or service to prevent injury, loss of life or prevent damage to or loss of property.

5. **Human Relations**- Made outstanding contributions toward enhancing the quality and morale of the workplace.

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**Nominee’s Name** ___________________________ **Work Phone** ___________________________

**Name of College/Unit** ___________________________ **Position** ___________________________

**SPA** (SPA) **EPA**

**Supervisor’s Name** ___________________________ **Work Phone** ___________________________

**Supervisor’s Signature** ___________________________________________________________

**Nominator Name** ___________________________ **Work Phone** ___________________________

**Relationship to Nominee** ___________________________ **Date** ___________________________

Please submit this form to the appropriate selection committee.