

Nomination Form

Nomination for Student Employee of the Year

On-Campus Student Employee

Off-Campus Student Employee

Student Information

Name: _____ Student ID (if known): _____
Position Title: _____ Length of Employment: _____

Employer Information

Employer/Department: _____
Supervisor: _____
Supervisor/Nominator Email Address: _____
Phone Number: _____

Please complete the six areas below, describing the accomplishments of the nominee, which you feel qualify him/her to be considered for this year's Student Employee of the Year Award. Cite specific examples of your student's work to give strength to your nomination.

1. **Reliability** (follows through on assignments, exhibits punctuality, and keeps supervisors informed)

2. **Quality of Work** (demonstrates satisfactory work following specified procedures, works accurately and thoroughly organizes and prioritizes tasks.)

