Nomination Form for Excellence in Diversity Award

NAME OF NOMINEE:

RANK/POSITION:

DEPARTMENT/OFFICE:

COLLEGE/DIVISION:

LIST AND GIVE A BRIEF DESCRIPTION OF ACTIVITIES ON AND OFF CAMPUS THAT IMPACT THE CAMPUS COMMUNITY. PLEASE DO NOT SUBMIT A VITA (in chronological order). NOTE: IF THE NOMINEES’ PRIMARY JOB DUTIES ARE RELATED TO DIVERSITY, THE SELECTION COMMITTEE WILL CONSIDER ONLY THOSE ACTIVITIES BEYOND THE NORMAL SCOPE OF THEIR DUTIES.

LIST THE IMPACT AND/OR PUBLIC GOOD FOR THE CAMPUS COMMUNITY:

OTHER ASSIGNMENTS RELATED TO DIVERSITY (e.g., committee memberships, involvement in campus organizations, professional advisory roles, etc.):

Nomination by/Contact Person:

Name: Phone Number Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_ Date: