

**College of Staten Island Nomination Form
Employee Recognition Award**

Employee Name

Job Title

Department

Location

The Employee Recognition Awards Program is designed to acknowledge members of the College Community whose superior performance contributes to or enhances the mission of the College while improving CSI's work environment. Qualifications for this award include, but are not limited to, an individual's exceptional job performance, or any exemplary deed of courage, skill or service that supports CSI's commitment to excellence.

Any employee may nominate candidates using this form.

Directions: Please select from the following categories below that apply and write a brief statement to support each selection. Additional documentation may be submitted.

Outstanding Job Performance – please explain

Distinguished Deed – please explain

_____ **Creative Contribution – please explain**

_____ **Exceeding the Goals of a Project – please explain**

_____ **Outstanding Community Relations that enhance the mission of the College – please explain**

Nominator's Name: _____ **Date** _____

Employee Name: _____

Office/Department Director/Chair:

Please include your comments below and forward this form to the Dean/Provost/Vice President as appropriate.

Signature: _____

Date: _____

Please Print Name: _____

AVP/Dean (For academic departments)

Your approval is required and your comments are requested below. Please forward this form to the Provost/Vice President.

Nomination: **Approved**

Disapproved

Signature: _____

Date: _____

Please Print Name: _____

Provost/Vice President

Your approval is required and your comments are requested below. Please return this form to the Director of Human Resources.

Nomination: **Approved**

Disapproved

Signature: _____

Date: _____

Please Print Name: _____
