UCSB Staff Assembly Citation of Excellence Award 2024-2025

Nomination Form

Nominee Information:	
Name:	Phone:
Department:	Length of Service:
Working Title:	Time in position:
Nominee's Immediate Supervisor: Name: Email:	
Next-Level Manager/Supervisor: Name: Email:	
Nominator & Endorser Information:	Dlama
Name of Endorser:	Phone:
Department:	Email:
Name of Nominator:	
Department:	Email:
Nominator Signature:	
Nomination Requirements:	
Please submit a nomination packet including: 1. A letter of nomination not exceeding two pages in 12 pt. 2. A letter of endorsement in support of the nomination no 3. A completed Nomination Form	
In reviewing the nominations, the selection committee wi work or performance, interpersonal skills, and extraord positive impact advancing the mission of the university.	
Submission Method and Deadline: Please email the nomination packet as a PDF attachment(s	s) to <u>chairs@staffassembly.ucsb.edu</u> .
Deadline for receipt 4:00PM, Friday, Ma	
TO BE COMPLETED BY HUMAN RESOURCES:	
Eligibility criteria confirmed by:	Date