

**NOMINATION INFORMATION FORM  
COLLEGE OF ALLIED HEALTH  
Carole A. Sullivan Superior Staff Award for Excellence in Performance**

<b>Nominee:</b>	
Name:	Title:
Campus Mailing Address:	
Email Address:	
<b>Nominator:</b>	
Name:	Title:
Campus Mailing Address:	
Email Address:	

**Please use as much or as little of each text box below as needed.**

- Evidence of superior performance in required responsibilities: How does the person consistently demonstrate superior performance? Please provide specific examples.**

(Examples may include how he/she does something that is above and beyond expectations, how the person helps others in a particularly kind and understanding manner, how he/she improves the morale of co-workers, how he/she exhibits “grace under pressure.”)

**2. Evidence of using independent initiative, leadership, and creativity in performing tasks:  
Please provide specific examples.**

(Examples may include a description of at least one thing the staff member went above and beyond on; other involvements including leadership that indicate well-roundedness; a task they performed more effectively, of high quality, in a tight deadline; a task that improved the quality of life in the department; a time they exhibited creativity in accomplishing a task.)

**3. Evidence of willingness to accept new responsibilities, acquiring new skills to enhance performance and personal development: Please provide specific examples.**

(Examples may include the person assuming responsibilities in a particularly effective manner, examples of new responsibilities, examples of new skills the nominee acquired, how the nominee enhanced his/her performance/personal development.)

*Question 3 continued...*

**4. Evidence of involvement in Department/College/University activities:**

**(Include name of committee, role, and other information. What committees? What role did the nominee have on the committee? How active has the nominee been? Please provide terms of committees.)**

A.

B.

C.

D.

E.

\_\_\_\_\_  
**Supervisor/Additional Signature**

\_\_\_\_\_  
**Date:**

\_\_\_\_\_  
**Department Chair Signature**

\_\_\_\_\_  
**Date:**