



EMPLOYEE OF THE YEAR NOMINATION FORM

This is a generic nomination form in pdf format. Print and complete this form, using additional paper if necessary, then send it through interschool mail to the address below.

This form is intended for those individuals who do not have access to a computer or wish to complete a nomination form in writing.

DEADLINE FOR NOMINATIONS IS FRIDAY, FEBRUARY 22.

- All non-teaching employees are eligible.
- Peers may nominate peers.
- Selection is NOT based on a popularity vote or multiple nominations for one nominee.

EX: Should an entire campus choose to nominate its counselor, only ONE nomination form should be submitted; signatures of those supporting the nomination and additional information to be attached to your nomination form can be faxed, sent through interschool mail or emailed in pdf format.**

If selected as a Finalist, the nominee will be contacted to confirm his/her attendance at the LISD Recognition & Awards Banquet on Friday, May 2.

The following nine questions refer to your NOMINEE.

1 CHOOSE ONE CATEGORY:

- Principal
- Secondary Assistant Principal
- Elementary Assistant Principal
- Administrator / Administrative Support (one category)
- Instructional Support
- Secretarial Support
- Technology
- Technical, Clerical & Aide
- Child Nutrition Services
- Facility Services / Distribution Center
- Durham School Services
- ARAMARK Custodial Services
- Substitute Employee / Teacher
- PTA Volunteer
- "Helping Hands" Volunteer

2 Nominee's name:

3 Nominee's job title:

4 Nominee's work site:

5 Years in present position:

6 Total years of work in LISD:

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7 **Total years in education or business:**

8 **If nominee's position requires responsibilities outside the typical for this job function, please describe:**

9 **List three reasons this nominee excels to such a degree that he / she should be considered for this award. Use additional paper, if necessary.**

1.
2.
3.

Please complete the following contact information requirements.

10 **Submitted by (your name or group):**

11 **YOUR contact information:**

Your name:

Your work site:

Work Phone:

Mobile:

Email:

12 **Please indicate your agreement:**

- I will notify the nominee that he / she has been nominated for a LISD 2008 Employee of the Year Award.
- If selected as a Finalist, the nominee will be present at the LISD Recognition & Awards Banquet on Friday, May 2.

I agree.

● Comments:

13 Other information:



Questions?

Contact Cathy Gunter in LISD's Communications Office for assistance.

- Phone: 469-948-8039
- Email: gunterc@lisd.net
- Fax: 972-355-2744

*****Send this nomination form, along with any additional information, signature lists, etc. through interschool mail to Cathy Gunter, Communications Specialist, Administration.***

Submit