

Victoria University Employee Award of Excellence Nomination Form

Details of Nom	inator:				
Name (First and	Last):	Job Title:		Department:	
Affiliation with □ Administrativ	Victoria University ye or PM Staff □	: Faculty	□ Alumnus [☐ Member of the Board of Reger	nts
		ate an individual <u>or</u> a ired if you are nomin		loyee Excellence Award. rd categories.	
INDIVIDUA	L Nomination: (Co	omplete this section to a	nominate an individi	ual.)	
Name (First and Last)		Job T	itle	Department	
TEAM Nomi	ination: (Complete t	his section to nominate	a team of 2 to 8 em	ployees.)	
TEAM Nomi	ination: (Complete t Name (First and		a team of 2 to 8 em Job Title	ployees.) Department	
TEAM Nomi Member 1	Name (First and		Job Title	· · ·	
	Name (First and	l Last)	Job Title	· · ·	
Member 1	Name (First and	l Last)	Job Title	· · ·	
Member 1 Member 2	Name (First and	l Last) 	Job Title	· · ·	
Member 1 Member 2 Member 3 Member 4	Name (First and	l Last) 	Job Title	Department	
Member 1 Member 2 Member 3 Member 4	Name (First and	l Last)	Job Title	Department	
Member 1 Member 2 Member 3 Member 4 Member 5	Name (First and	l Last)	Job Title	Department	

Reasons for Nomination:

How has the nominee(s) demonstrated excellence? Please frame your response according to one or more of the award criteria.

Your Signature:

Date: