FORM E: Staff Team, Organization, or

Non-Academic Unit Award Nomination

Peter W. Likins Inclusive Excellence Awards 2011

Section I **Nominee Information**

Name: _____ _____

First Name Last Name

Note: For a non-academic unit nomination list department head above. — For a staff organization nomination, list the President or Chairperson above. — For a staff team nomination, list the team lead above and their unit/organization below. Add the remainder of the team on Form G.

Department/Unit/Organization: _____

University Address: _____

University Telephone: _____

University Email Address: _____

Section II **Your (Nominator's) Information**

Name: _____ _____

First Name Last Name

Department/Unit/Organization: _____

University Address: _____

University Telephone: _____

University Email Address: _____

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Section III **Nomination Type** (Please check one box below.)

Non - Academic Unit ☐

Staff Team ☐

Staff Organization ☐

Section IV **Nomination Submission** Deadline Friday, October 7, 2011 by 5:00 pm.

Submit your nomination materials to the Programs for Inclusive Excellence, Office of the President by returning or mailing your nomination packet to

Programs for Inclusive Excellence, Office of the President
Administration Building, Room 412
1401 E. University Blvd.
P.O. Box 210066
Tucson, Arizona 85721-0128
Fax to 520.626.7612

Email to jarvizu@email.arizona.edu

Incomplete nominations will not be considered.

* *Staff must be currently employed at the UA at the time of their nomination. Staff organizations must be recognized by the University.*