Nomination Form

Section 1
Name of Nominee: __________________________________________________________
Address: ___________________________ City: ______________State: ___ Zip: _____
Telephone: (_____) ____________________
E-mail Address: ____________________________________________________________

Year of Graduation: _________ Major: __________________________________________

Other Degrees/Education: ______________________________________________________
___________________________________________________________________________

Occupation or Profession (current/retired): ______________________________________
___________________________________________________________________________

Section 2
How has the nominee demonstrated a proven record of extraordinary distinction and
accomplishment in his or her field?
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

List awards and/or honors the nominee has received in recognition of his or her career
achievements locally, nationally or internationally.
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
Tell the story of the nominee’s lifelong accomplishments and achievements in his or her field:
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

List the professional organizations and offices the nominee has held:
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

How has the nominee demonstrated achievements that reflect the knowledge and values gained from his or her education:
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Other accomplishments and nomination information:
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Why do you believe your nominee deserves this award?
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Additional Notes: ___________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Please attach up to five letters of recommendation from those who are familiar with the nominee’s accomplishments and service if available.

Please attach up to three articles, photographs, or other supporting information.
Return COMPLETE nominations to:
Colorado State University Alumni Association
7114 Campus Delivery
Fort Collins, CO  80523-7114

Questions?
Email: csualumni@colostate.edu
(970) 491-6533 or toll free at (800) 286-2586

NOMINATIONS CAN ALSO BE COMPLETED ONLINE AT WWW.ALUMNI.COLOSTATE.EDU

DEADLINE FOR NOMINATIONS IS: Friday, June 30, 2017