



## Emeritus Faculty Award

### CHADRON STATE COLLEGE NOMINATION FORM

I wish to nominate the following individual for consideration for Emeritus Faculty status at Chadron State College. I have provided a letter of support that addresses the criteria for the award and attached a copy of the individual's CV. This nomination will be shared with the person nominated.

#### Nominee Information

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

#### Nominee Criteria

- Served Chadron State College for at least 15 years
- Held rank of full Professor
- Demonstrated exemplary performance in the areas of teaching, scholarship/creative activities, and service throughout his/her tenure at the College
- Demonstrated leadership and collaboration

#### Primary Nominator Information

Name \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

I affirm that I am not a relative, spouse, or significant other of the nominee.

\_\_\_\_\_  
Signature of Nominator

\_\_\_\_\_  
Date