



EMERITUS STATUS

CSC NOMINATION FORM

*Send nominations to the office of the vice president for academic affairs
ppperlinski@csc.edu*

I wish to nominate the following individual for Emeritus status at Chadron State College. I have provided a letter of support that addresses the criteria for Emeritus status. This nomination will be shared with the person nominated.

Nominee Information

Name _____

Rank and Department _____

Address _____

Telephone _____

Primary Faculty Nominator Information

Name _____

Title/Department _____

Address _____

Telephone _____

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

Signature of Primary Nominator

Date

Signature of Academic Dean

Date