

Human Resources Service Excellence Leave Award Nomination Form

Nominee Infor	mation:					
Nominee:			R#:		Date:	
	First	Last				
Department:				Nomin	ee Position:	
	(n		Justification for Pa umentation in at l		ff Reward the following categories)	
Check all that	apply:					
Consisten	tly exceeds job	standards				
Proactivel	y meets custom	er needs or solve	es potential problems			
Represen	ts the work uni	and TTU as a cus	tomer-oriented, prof	essional, knov	wledgeable and friendly organization	
Participat	es in mentorin	g activities to hel	p co-workers enhanc	e their work p	performance	
Contribut	es to a friendly	, responsive wor	k environment and hi	igh morale		
Nominator:	First	Last		Signature:		Date:
Supervisor Sec	tion:					
-	rformed appra	sal:	Overall rating: _		Recommended hours to be awarded (maximum 32 in a fiscal year):	
Approver:				Signature:		
*attachment of	a copy of the late	est performance ap	praisal required			Date:
Approvals:						Date Signed:
Dept Manage	r:			Signature:		_
Next Level Mg (if applicable)						
SVC/SVP/VP o SVPAA:	r P/ 			Signature:		

After filling out please print to obtain signatures. When completed, please scan and send to awards.recognition@ttu.edu along with copy of latest performance appraisal.