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 leadership skills and exemplary public and/or
community service to his or her community? ________________________________

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

How has the nominee provided service to his or her charitable or religious
organizations? __________________________________________________________

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
How has the nominee provided service to local, state, or national government?
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

How has the nominee provided service to the medical or environmental well-being of humankind?
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

How has the nominee provided service to Colorado State University (volunteer roles, board memberships, committees, etc.)?
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

List any awards or honors the nominee has received recognition for related to public service.
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Describe the nominee’s public service highlights.
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Other accomplishments and nomination information:
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Why do you believe your nominee deserves this award?
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
Please attach up to three (3) letters of recommendation from those who are familiar with the nominee’s accomplishments and service if available.

Please attach up to three (3) articles, photographs, or other supporting information.

Name of Nominator: ________________________________
Address: ___________________________ City: __________ State: _______ Zip: _______

Telephone: (H) (___) _____________________ (W) (___) _______________________
E-mail address: ______________________________

Return COMPLETE nominations to:
Colorado State University Alumni Association
7114 Campus Delivery
Fort Collins, CO 80523-7114

You may attach a resume, letters of recommendation, or any additional supporting information to this nomination

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, July 12, 2019.