

Distinguished Faculty Awards Program Nomination Form

Please complete this form and return it with an up-to-date vitae and other supporting documentation for your nominee, as described in the guidelines for the Distinguished Faculty Awards Program.

| Name of Nominee: | |
|---------------------------------------|---|
| College or School: | |
| Department: | |
| Rank: | |
| Number of years at VCU: | |
| Nominated for (please check one box): | |
| Distinguished Teaching Award | |
| Distinguished Scholarship Award | |
| Distinguished Service Award | |
| Outstanding Early Career Award | : |
| Outstanding Term Faculty Award | |
| Outstanding Adjunct Faculty Award | - |
| University Award of Excellence | |