

**DUKE UNIVERSITY & HEALTH SYSTEM BLUE RIBBON AWARDS
PRESIDENTIAL AWARD NOMINATION FORM**

Deadline to Submit: Friday, February 20, 2009

Please Type or Print Legibly

NOMINEE: *Dr./Ms./Mr.* _____ **Duke ID:** _____
First *Middle Initial* *Last*

Title: _____ Department: _____

Complete Physical Address: _____

Phone: _____ Email: _____

Category (*Please check one*): _____ Years of Service in Current Position: _____
 Clerical/Office Support Clinical/Professional Non-Managerial Service/Maintenance
 Managerial Executive Leadership

Nominee's Direct Supervisor: _____
Dr./Ms./Mr. *First* *Middle Initial* *Last*

NOMINATOR: _____
Dr/Ms/Mr *First* *Middle Initial* *Last*

Title: _____ Department: _____

Complete Physical Address : _____

Phone: _____ Email: _____

Please check the nomination criteria which apply (must check at least one):

- Overall performance has regularly and consistently exceeded expectations, and has reflected a high level of service, trustworthiness, and respect
- Completion of an especially formidable task for the University and/or Health System
- Work which has resulted in a significant boost in quality, productivity and/or cost savings
- Efforts which have resulted in measurable improvements in safety

Please attach a typed summary explaining how the Nominee has demonstrated the criteria checked above and why they should be considered for the Presidential Award.

HELPFUL TIPS:

- Cite specific examples of Nominee's work and achievements which have made him/her eligible for nomination.
- Describe how the University and/or Health System have benefited from Nominee's work.
- Strongly recommended – Include letters of support from additional co-workers, supervisor/manager, and/or department head.

NOMINATION AUTHORIZATION (MUST BE DEPARTMENT HEAD LEVEL OR HIGHER)

Signature: _____ **Name:** _____
First *M. I.* *Last*

Title: _____ Department: _____

Complete Physical Address (documents are hand-delivered): _____

Phone: _____ Email: _____

Nomination is incomplete without an authorized signature.

Completed nominations must be received by 5:00 p.m., Friday, February 20, 2009

Office of the President, 207 Allen Building, Box 90001

Phone: (919) 684-2424 Fax: (919) 684-3050