Florida Tech
Student Employee of the Year
Nomination Form
2015-2016

Please indicate which type of student employee you are nominating:

____Co-op
____Internship
____Part-time Job

Nominee’s Name: ____________________________________________________________

Department/ Business Name: __________________________________________________

Nominee’s Job Title and Description of Duties: ________________________________
________________________________________________________________________
________________________________________________________________________

Length of Employment: ______________________________________________________

Please list the number next to each category listed below, which you feel best represents the student’s qualities based on the description. (“1” being acceptable, “5” being outstanding)

Attitude: __________________
Quality of work: ______________
Reliability/ Dependability: ____________
Interpersonal Skills: ______________
Initiative: ______________
Professionalism: ______________
Ability to Learn: ______________
Overall Performance: ______________

Please attach a statement, up to one page, describing the accomplishments of the nominee that you feel qualifies him/her for the award of Student Employee of the Year. Where possible, please cite specific examples of the nominee’s achievements or contributions which have influenced your decision to nominate him/her. Please be aware that the more information the judges have, the more helpful it is in determining the winners. This statement is very important and is required for the nomination to be complete. Incomplete nominations cannot be processed.

Name of Nominator: _______________________________________________________
Signature: ________________________________ Date: __________

* GPA ______

Please return completed nominations to Career Management Services with a letter of recommendation by Monday, March 7th.