Nomination Form

USU 2003 Student Employee of the Year

Name:_____ Job Title:_____

Office/Department:_____ Phone:_____

Responsibilities:_____
_____

My student employee is outstanding because:
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

Supervisor/Nominator: _____ Phone:_____

Nomination forms are due by April , 2003

Please return this form to the Student Employment Office: TSC, Room 106 or UMC 1800.