SCHOOL OF MEDICINE

OUTSTANDING PERFORMANCE

NOMINATION FOR TIER TWO AWARD

2007-2008

Employee's Name_____ Employee ID Number_____

Payroll Title _____

Department Name _____

Employee Group (check one): o MSP o PSSDate Appointed to Classification: _____

Employee's last Performance Evaluation Date_____ Overall Rating_____

TO BE CONSIDERED FOR A TIER TWO AWARD, A NOMINATION PACKET INCLUDING THE FOLLOWING DOCUMENTATION MUST BE SUBMITTED FOR REVIEW BY THE AWARDS COMMITTEE:

1. Copies of the selection criteria and documentation used to support the Tier One award. It is essential that the documentation: 1) address the nomination and selection criteria; 2) provide specific examples of outstanding performance and the specific time period in which the outstanding achievement occurred; 3) demonstrate the employee's positive effects on the department, campus, client populations, university and/or community, and 4) describe the process by which the employee was selected to receive a Tier One award.
2. Two letters of support in addition to Tier One Nomination. Letters should demonstrate the specific performance measures that justify the proposed special recognition. Letters are expected to present details of how the employee's performance excels above and beyond expectations. It must be clear how the nominee's performance has contributed to the department, school and/or campus. Letters should also communicate why the nominee should be considered one of the school's top performers.

AMOUNT OF TIER ONE AWARD: $_____

APPROVED TIER TWO AWARDS WILL EQUAL 5% OF THE RECIPIENT'S ANNUAL SALARY AS OF JUNE 1, 2008

I SUPPORT THIS NOMINATION AND AGREE THE EMPLOYEE MERITS THE PROPOSED AWARD. (Note: If the employee has a shared appointment or is assigned to a cross-unit team, all supervisors must endorse the nomination.)

_____	_____	_____	_____
Supervisor's Signature	Date	Typed/Printed Name	Phone
_____	_____	_____	_____
Manager's Signature	Date	Typed/Printed Name	Phone