

Emeritus Faculty Nomination Form

I wish to nominate the following individual for consideration for Emeritus Faculty status. I have provided a letter of support that addresses the criteria for the award and attached a copy of the individual's CV. This nomination will be shared with the person nominated.

Emeritus Faculty at		
O Chadron State College	O Peru State College	O Wayne State College
Nominee Information		
Name:		
Address:		
Telephone:		
Nominee Criteria		
☐ Demonstrated exemplary per and service throughout their ☐ Demonstrated leadership are ☐ Primary Nominator Information	ir tenure at the College nd collaboration	teaching, scholarship/creative activities,
Name:		
Title:		
Address:		
Telephone:		
I affirm that I am not a relative, spou	use, or significant other of t	he nominee.
Signature of Nominator		Date