NOMINATION FORM FOR COLLEGE OF LIBERAL ARTS AND SCIENCES

TEACHING AWARD

Nominations **MUST** be received by **November 22, 2019**

1. Name of teacher you are nominating (nominee) ____________________________

2. Department of nominee ____________________________

3. Person making nomination is
   a) former student _____
   d) chair ______
   b) faculty member _____
   c) univ. admin. ______
   d) self ________

4. You may return this form to Arlene Williams in 2014 Turlington Hall or mail it to her as shown below:

   **by campus mail:** Arlene Williams
   P.O. Box 117300

   **by U.S. Mail:** Arlene Williams
   2014 Turlington Hall
   PO Box 117300
   Gainesville FL 32611-7300

   **by email:** arlenew@ufl.edu

The identity of the person making this nomination will remain confidential.

5. Your name (please print) ____________________________

6. Signature ____________________________