

352-392-4626 training@ufl.edu

Date _____

Training and Organizational Development
Attn: Meritorious Service Awards
PO Box 115006 Gainesville, FL 32611-5006

Nomination of Meritorious Service for _____ / _____
(**Name of nominee as it will appear on award**) (UFID)

Number of Years with the University _____ Date of Retirement _____

Narrative: (Please include a short description of the nominee and their service to the university).

Date for awards presentation _____ Department/College _____

Contact Person _____ Phone/ Email _____ / _____

Supervisor/ Department Chair Signature _____
(Required)

Vice President Signature _____
(Optional)