

# 2015 Outstanding Professional Award Nomination Form



***Submission Deadline: October 2, 2015***

## **Nominator Information**

Name of Person Submitting Nomination:

Position/Title:

Institution:

Address:

City/State/Zip:

Office Phone:

Email:

## **Award Nominee Information**

*(Nominees must have at least four years of professional experience in the field of parent and family programming.)*

Nominee's Name:

Position/Title:

Institution:

Address:

City/State/Zip:

Office Phone:

Email:

## **Please include the following with this form:**

- Letter of nomination from the person completing this form (must be a staff member of an AHEPPP member institution). This letter should provide a description of the nominee's impact on their campus/program and their commitment to the field of parent and family engagement.
- Nominee's bio.
- Up to two additional letters of support.

If all of your materials are electronic, please email them to [gspencer@uark.edu](mailto:gspencer@uark.edu). For hard copies, please send the completed nomination form and all required materials to:

Quincy D. Spencer  
Director of New Student & Family Programs  
University of Arkansas  
ARKU A688  
Fayetteville, AR 72701