

Candidate's Last Name _____

CHECKLIST COVER SHEET

This form is to be the first page of all nominations (original and copy). All items must be attached and all certifications completed. Please photocopy this form as needed for submission of your nominations.

CANDIDATE'S NAME: _____

CANDIDATE'S CAMPUS: _____

COMPLETE POSITION TITLE: _____

CANDIDATE'S DEPARTMENT: _____

CHECK THE PROGRAM TO WHICH THE NOMINATION IS BEING SUBMITTED

- Excellence in Faculty Service
- Excellence in Librarianship
- Excellence in Professional Service
- Excellence in Scholarship and Creative Activities
- Excellence in Teaching

ENDORSEMENT OF CAMPUS PRESIDENT (REQUIRED)

I certify campus endorsement of this nomination and compliance with program requirements.

President's Signature

Date

President's Telephone Number

**PLEASE COMPLETE ALL CERTIFICATIONS FOR REVIEW AT THE
UNIVERSITY-WIDE LEVEL**

MATERIALS SUBMITTED IN CONJUNCTION WITH THE NOMINATION

The documentation identified below is required as part of the nominee's dossier. Please verify its inclusion in the nomination packet by checking the appropriate boxes.

- | | |
|---|---|
| <input type="checkbox"/> President's Transmittal Letter | <input type="checkbox"/> Summary Presentation |
| <input type="checkbox"/> Description of Nomination Procedures | <input type="checkbox"/> Vita Statement |

CAMPUS CONTACT

Please type the name and telephone number of the individual to be contacted in case questions regarding the nomination arise. **The campus is to identify a single individual as the designated contact for all nominations submitted.**

Name & Title _____ Phone Number _____

CERTIFICATIONS

Please certify campus compliance with the *Policies and Procedures* by checking each of the certifications below. (Do not include separate statements regarding the certifications.)

- Local Selection Committee** - This is to certify that the local selection committee was structured as directed and complied with the current *Policies and Procedures*.
- Eligibility Requirements** - This is to certify that the nominee satisfies all eligibility criteria for the program as prescribed in the current *Policies and Procedures*. Note that an individual is only allowed to receive a Chancellor's Award for Excellence once in five (5) years.
- Compliance with Policies** - This is to certify that this nomination complies with the current *Policies and Procedures*.

This form is also available online at <http://www.suny.edu/provost/facultyawards.cfm>

**EXPLAIN BELOW ANY DEPARTURES FROM POLICY AS STATED IN THE
CURRENT GUIDELINES.**