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| **NIFA Partnership Awards Nomination Form** |

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| **AWARD CATEGORY** (*please mark “X” in appropriate box;* o*nly one category may be marked*)   |  |  | | --- | --- | |  I. Mission Integration of Research, Education, or Extension | IV.Effective and Efficient Use of Resources | | II. Multistate Efforts | V.Program Improvement through Global Engagement | | III.Innovative Programs and Projects |  | | | | | |
| **NOMINEE**  (*please mark “X” in appropriate box*) **** Individual**** Team (limit of 20 members) | | | | |
| **NAME OF NOMINEE OR TEAM Be sure to include the exact name to be shown on the award. (If a team, provide a team name and include each team member’s name in the justification below.)** | | | **INSTITUTION NAME (If a team, provide a name and institution for the lead team member.)** | |
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| **TELEPHONE** (*include area code*) | **FAX** | | **E-MAIL** | |
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| **NAME OF NIFA NATIONAL PROGRAM LEADER AFFILIATED WITH PROGRAM OR PROJECT** | | | | |
| **CITATION** (*not more than 25 words*) | | | | |
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| **JUSTIFICATION: Using the selection criteria, justify and document the nomination for Category I, II, III, IV, or V. For team nominations, include a brief but specific description for each team member (limit of 20 team members) of their particular substantial or significant role. DO NOT ATTACH MORE THAN ONE ADDITIONAL 8” x 11” PAGE (ONE-SIDED) FOR INDIVIDUAL NOMINATIONS OR TWO ADDITIONAL 8” X 11” PAGES (ONE SIDED) FOR TEAM NOMINATIONS. USE FONT SIZE AND TYPE NO SMALLER THAN TIMES NEW ROMAN, ARIAL, OR COURIER, 12 POINT. NOMINATIONS EXCEEDING THESE REQUIREMENTS WILL BE DISQUALIFIED.** | | | | |
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| **NOMINATOR NAME** *(printed)* | | **NOMINATOR TITLE & INSTITUTION** | |
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| **SIGNATURE OF NOMINATOR** | | **DATE** | |
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| **TELEPHONE** (*include area code*) | **FAX** | | **E-MAIL** |
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| **NAME & TITLE OF DEAN OR DIRECTOR**  (*if not the nominator*)**, PRINTED** | | **SIGNATURE OF DEAN OR DIRECTOR** | |
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