

**MICHIGAN STATE UNIVERSITY
DISTINGUISHED ACADEMIC STAFF AWARD 2017-2018**

(Please complete DATA FORM and include as a cover sheet to candidate's nomination materials).

1. DATA FORM

NOMINEE

Nominee:

IMPORTANT: PRINT NAME AS IT SHOULD APPEAR ON AWARD CERTIFICATE

Academic Rank:

Title (if applicable):

Appointment Department(s)/College(s)/MAU(s):

Date of Initial MSU Appointmentⁱⁱ:

Date of Current MSU Appointment:

Office Address:

Office Phone:

Email:

Home Address:

Cell/Home Phone:

Is Nominee aware s/he is nominated? **Yes** **No**

NOMINATOR

Nominator:

Academic Rank/Title:

Department/College:

Office Address:

Phone:

Email: