

TEACHER-SCHOLAR AWARDS 2017-2018

(Please complete and include the DATA FORM (two pages))

Section 1. DATA FORM

NOMINEE

Nominee:

IMPORTANT: PRINT NAME AS IT SHOULD APPEAR ON AWARD CERTIFICATE

Date of TERMINAL DEGREE²:

If applicable, details of POSTDOCTORAL appointment(s):

Academic Rank:

Title (if applicable):

Date of MSU APPOINTMENT:

Faculty/Teaching Appointments³ - Department(s)/College(s):

Please include a percentage estimate of how much effort is devoted to each:

Instruction/Teaching	%
Research/Creative Activities	%
Service	%
Public Service/Outreach	% (Should total 100%)

Office Address:

Office Phone:

Email:

(DATA FORM continued)

NOMINATOR

Nominator:

Academic Rank/Title:

Department/College:

Office Address:

Phone:

Email: