**NOMINATION FORM**

**Department of Plant Pathology & Microbiology**

**Master of Science in Plant Pathology**

**Graduate Scholarship**

**Nominee’s Name:** UIN:

Address:

Phone: E-mail:

**Summary of Applicant’s Academic Background:**

Bachelor’s degree Institution: GPR:

**Departmental Information:**

Nominating Professor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

PLPM Awards Committee Chair: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Associate Department Head: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Nomination Packet should include:**

1. Complete the Nominating Cover Form
2. Complete the one-page nominating statement
3. Attach updated resume/CV (maximum 2 pages)

**Nominating Statement**

**Nominating Statement from Department or Faculty Advisor** (100 word limit).

**Academics** (100 word limit)**:** On a scale of 1 to 10 scale, score =\_\_\_\_

**Scholarly Productivity and/or Recognition** (100 word limit)**:** On a scale of 1 to 10 scale, score = \_\_\_\_

**Demonstrated Leadership and Service** (100 word limit)**:** On a scale of 1 to 10 scale, score = **\_\_\_\_**