NOMINATION FORM FOR COLLEGE OF LIBERAL ARTS AND SCIENCES
TEACHING AWARD

Nominations **MUST** be received by **November 6, 2009**

1. Name of teacher you are nominating (nominee) ____________________________________________

2. Department of nominee ________________________________________________________________

3. Person making nomination is
   a) student
      1) currently in nominee's course __________
      2) previously in nominee's course __________
   b) parent __________ c) alumnus __________
   d) faculty member __________
   e) univ. admin. or staff member __________
   f) other (please specify__________

4. Briefly state why you believe this teacher should receive a teaching award; be as specific as possible. You may wish to address teaching effectiveness, innovation, creativity, ability to interest students, commitment and dedication, fairness, techniques, and intellectual impact. (You may write on the back of this form).

5. You may return this form to Arlene Williams in 2014 Turlington Hall or mail it:

   **by campus mail:** Arlene Williams
   P.O. Box 117300

   **by U.S. Mail:** Arlene Williams
   2014 Turlington Hall
   PO Box 117300
   Gainesville FL 32611-7300

   **by email:** arlenew@ufl.edu

6. Your name (please print) ________________________________________________________________

   Name of person making nomination will be treated confidentially

7. Signature __________________________________________________________________________