



## Nomination Form

### The Five-Star Service Quarterly Recognition Program

*An award program for staff members who provide exceptional customer service*

Submitter's Name: \_\_\_\_\_

Department: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Date of Submission: \_\_\_\_\_

Employee you wish  
to recognize: \_\_\_\_\_

Department: \_\_\_\_\_

Years of Service: \_\_\_\_\_

Work Address:  
(for example, UH-C431) \_\_\_\_\_

Telephone #: \_\_\_\_\_

Dept.Head's Name: \_\_\_\_\_

#### **INSTRUCTIONS FOR NOMINATOR:**

1. Fill out **both sides** of the nomination form.
2. Attach additional information if you wish.
3. Send completed form to: **Kitty Donohue, Marketing and Media Relations - UH-C431.**

Winners are:

- Recognized at the CEO's Leadership Meeting.
- Featured on the *Wall of Fame*, located outside the Garden Cafe.
- Highlighted in the *Five Star Service Quarterly News*.
- Eligible for the Employee of the Year Award.

**Please complete other side**

