



## Professional Part Time Employee of the Month Nomination Form

### Purpose

The Staff Employee of the Month (SEOM) and Professional Part Time Employee of the Month (P/TEOM) programs are established for all fulltime and professional part time staff of Columbus State Community College and designed to recognize excellence.

### Criteria for Nominating a Professional Part Time Employee of the Month

Staff members may be nominated for this award for their exemplary achievements or efforts in **one or more** of the following areas:

- Makes a difference to Columbus State and/or to members of the campus community.
- Goes above and beyond expectations.
- Excels as a team player.
- Strives to bring out the Columbus State "Spirit" in others.

### Eligibility

Any Professional Part Time staff member that has been employed for at least 2 years is eligible.\*

### How to Nominate

Complete both pages of this nomination form. Columbus State students, employees and visitors are encouraged to submit nominations at any time; however, completed nominations should be returned to the Human Resources Department in Rhodes Hall 115 by the twentieth of the month to be guaranteed consideration for the following month. Applications will be considered for a period of 6 consecutive months by the SEOM committee. If mailing the form, please send to: Human Resources, Rhodes Hall 115, Columbus State Community College, 550 East Spring Street, Columbus, OH 43216. A written notification of the acknowledgement of the nomination will be sent to you within 7 days of submission.

\*non-eligible employees:

- under disciplinary action in the past year
- supervisors or managers
- Staff Employee of the Month Committee Member

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### Nominee Information

I nominate the following Professional Part time staff member for the Columbus State Community College Professional Part Time Employee of the Month (P/TEOM):

Name: \_\_\_\_\_

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

### Nominator Information

Name: \_\_\_\_\_

Role:  Faculty  Staff  Student  Other \_\_\_\_\_

Would you like to attend the P/TEOM recognition event?  Yes  No

Email address and phone number: \_\_\_\_\_

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

Nominee: \_\_\_\_\_

Please provide a detailed description in the area below, explaining why you have nominated this employee for part time employee of the month. Please include examples of how this staff member meets one or more of the nominating criteria. Please indicate if an additional document is attached.