**2024 TCAFS AWARD NOMINATION FORM**

Instructions: Please fill out all the fields. After completing the form, email the form to bsilvy@tamu.edu . You will receive a confirmation that the form was received.

**NOMINATOR INFORMATION**

Name:

Title:

Organization:

Contact Phone:

Email address:

**NOMINEE INFORMATION**

Name:

Title:

Organization:

Address:

City:

State:

Zip Code:

Contact Phone:

Email address:

**AWARD INFORMATION**

**Award Category:** Select one from the following Administration, Culture, Education, Management, Research, Student, Technical Support, or Special Recognition

Award Category for Nominee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Summary of Nomination:** (Please limit to 4 sentences. The summary will be read at the awards ceremony if your candidate receives an award.

**Nomination Letter:** Describe the qualifications of the nominee. How does the nominee meet the criteria for the award?