President’s Award for Distinguished Service

President Barbara Snyder invites you to nominate a non-faculty CWRU staff member for the President’s Award for Distinguished Service. This annual award honors up to three staff members whose outstanding contributions to our campus culture have a transformational effect on university colleagues, students, or visitors with whom they come into contact.

Nominations may come from any university staff, student or faculty member. The Staff Recognition Committee of the CWRU Staff Advisory Council will review nomination materials received from throughout the University, select outstanding candidates, and forward the names of those individuals (along with relevant biographical information) to the Office of the President. The honorees will each receive a $1,000 cash award; their names will be engraved on a plaque that is currently on display in the Adelbert Hall quad side foyer. The recipients will be recognized at the Staff Service Awards Luncheon in June.

Criteria for Nomination

1. Nominee must be a permanent, non-faculty staff member with a minimum of five years of university service.
2. Nominee must exhibit qualities that are consistent with a university striving to create a powerful learning environment that has a transformational impact on all who teach, learn, discover, and work here so they are prepared and engaged to serve society.
3. Should a nominee be a current member of the SAC Staff Recognition Committee, he or she will become inactive during the selection process.
4. Nominee must not be a previous recipient of the award.

Nomination Procedure

1. Use the attached form to explain why your nominee deserves the President’s Award for Distinguished Service in three paragraphs describing: 1) how the nominee made a transformational impact on others; 2) a specific example of the nominee’s contribution to the university; 3) the exceptional qualities recommending this nominee for the award.
2. Provide the names of two (2) individuals (student/staff/faculty) who can/will support your nomination. (pg 3)
3. Send the nomination materials to:
   SAC Staff Recognition Committee
   C/O Pam Capasso
   School of Medicine, Robbins Bldg.
   Neurosciences E653
   LC: 4975

The President’s Award for Distinguished Service was created in honor of Roseanne Shaerban, A University employee whose qualities and commitment set a standard for distinguished service. Roseanne Shaerban (May 9, 1958 –February 6, 1989) was a friendly and familiar face at Case. Her family, friends, and co-workers remember her for the care, concern, loyalty and support she demonstrated to the University community. Roseanne was feisty, creative, and exceptionally generous in her willingness to help others in need.
2018 Nomination Form

President’s Award for Distinguished Service

Nominee Information

Name:______________________________________  Hire Date:___________________

Job Title:_______________________________ Yrs in Current Position:_______

Department:______________________________________________________________

Campus Address:__________________________________________________________

Building                                  Room Number                    Location Code

Supervisor Information  (Check if same as nominator)

Name:__________________________________________________________________

Job Title:________________________________________________________________

Department:______________________________________________________________

Campus Address:__________________________________________________________

Building                                  Room Number                    Location Code

Nominator Information (Check if same as supervisor)

Name:__________________________________________________________________

Job Title:________________________________________________________________

Department:______________________________________________________________

Campus Address:__________________________________________________________

Building                                  Room Number                    Location Code

Please return completed form (including attachments) by April 6, 2018, at 5pm to:

SAC Staff Recognition Committee
C/o Pam Capasso
Neurosciences – E653
School of Medicine

LC: 4975
2018 Nomination Form President’s Award for Distinguished Service
(continued)
Please use this sheet in recommending the nominee for the President’s Award for Distinguished Service.

Nominee: _________________________________________________________________

Your Name: __________________________________ Date: ______________

1. Tell (about) how the nominee made a transformational impact on others.
   _______________________________________________________________
   _______________________________________________________________
   _______________________________________________________________
   _______________________________________________________________

2. Give a specific example of the nominee’s contribution to the university.
   _______________________________________________________________
   _______________________________________________________________
   _______________________________________________________________
   _______________________________________________________________
   _______________________________________________________________

3. Describe the exceptional personal qualities that make this nominee a candidate for the award.
   _______________________________________________________________
   _______________________________________________________________
   _______________________________________________________________
   _______________________________________________________________
   _______________________________________________________________
   _______________________________________________________________

Supporters:
Name: __________________________ Email: ______________________ Ext: ______
Signature: __________________________________________________________________

Name: __________________________ Email: ______________________ Ext: ______
Signature: __________________________________________________________________

Name: __________________________ Email: ______________________ Ext: ______
Signature: __________________________________________________________________