

Gene W. Childress Leadership Award

Awarded for outstanding leadership in government

NOMINATION FORM

The nominee must be a full-time, permanent, public employee but does not have to be a Certified Public Manager®.

Nominee Information:

Name: _____

Title: _____

Cabinet/Agency: _____

Mailing Address: _____

Work Phone: _____ Email: _____

POSSIBLE REASONS FOR NOMINATION:

- Exceptional level of service to the public
- Excellent role model
- Frequently performs above and beyond the call of duty
- Exhibits long term dedication to their organization

I am nominating this public employee for the Leadership Award for the following reasons: (Please be specific.)

If additional space is needed, please attach another sheet.

Nominator's Information:

Name: _____

Title: _____

Cabinet/Agency: _____

Mailing Address: _____

Work Phone: _____ Email: _____

Signature of Nominator

Date