

Outstanding Part-Time Teaching Award

COVER SHEET

Name of Faculty Nominee: _____

Nominee's Academic Home: _____

Nominee's College: _____

Nominee's Dean: _____

Dean's Signature: _____

For jointly appointed, graduate, or honors faculty ONLY:

Sharing Department: _____

Sharing College (if different than Nominee's): _____

Sharing Dean (if different than Nominee's): _____

Sharing Dean's Signature: _____