|  **Nominee**

| **Name** | **Title** | **Supervisor** |
| --- | --- | --- |
| **Department** | **Division** | **Physical Location** |

 **\*If applicable, please use the nominee’s preferred name and working title as it will be printed on the certificate.** |
| --- | --- | --- | --- | --- | --- | --- |
| **Nominator**

| **Name** | **Title** | **Phone Number** |
| --- | --- | --- |
| **Department** | **Division** |

 As the nominator, are you willing to be recognized? [ ]  Yes [ ]  No **Complete “Reason for Nomination” below** **Division Approval**

|  |  |
| --- | --- |
| **Division Director’s or Designee’s Signature** | **Date** |
|  |  |
| Comments  |

 **Department Approval**

|  |  |
| --- | --- |
| **Department Commissioner’s Signature** | **Date**  |
|  |  |
| Comments  |

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| **Co-worker Recognition Award Information** |
| **Eligibility –** Individual employees up to, and including, first line supervisors.**Criteria –** Awarded to an individual who supports his/her co-workers, coaches, mentors or peers, shows dependability or interdivisional support of co-workers, personifies the spirit of the division or the department as a whole and its mission, and serves as a model of excellence for co-workers on a daily basis.To view scoring criteria and nomination examples, go to <http://denaliawards.alaska.gov>. |
|  |
| **Reason for Nomination** Be specific. Address the criteria on the Denali Awards web page and the time period. Please limit nominations to approximately 500 words. Attachments such as articles, brochures, photos, etc. are not scored as part of the nomination. |
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Deliver completed nomination forms to the nominee’s department representative.

For a list of department representatives, go to <http://denaliawards.alaska.gov>.