

Ruby Raines Administrative Professionals Award Nomination Form

Overview:

The Ruby Raines Administrative Professionals Award recognizes the administrative staff members who demonstrate hard work and commitment to ensure excellence in support of the University’s mission and success within their own respective programs. Up to one recipient may receive an engraved award and eight-hours of paid administrative leave, which is presented during the Staff Appreciation Luncheon during Staff Appreciation Month. The paid leave awarded must be used by the recipient within twelve (12) months of receiving the award hours and are not eligible for payment upon separation with the University.

Eligibility for Nominees:

- The staff member must be in a UNT retirement-eligible staff position for at least six consecutive months.
- The staff member must hold a position in an administrative professional job classification, including Executive Assistant, Senior Administrative/Administrative Coordinator, Senior Administrative/Administrative Specialist, and Office Support Assistant/Associate.
- The staff member may not have received any formal disciplinary action or performance improvement plan within the twelve months prior to the nomination date.
- The staff member may not have received the award within the previous three years.

Process for Nomination and Selection:

- Nomination may be made by any UNT employee or student.
- Complete the fillable form, giving specific examples of how the staff member has met the criteria within the allotted word allowance. Additional attachments will not be accepted. Submit the completed document electronically or print and deliver to Human Resources, located in the Support and Services Building, 116.
- Human Resources will verify eligibility and forward the nomination to the appropriate Vice President.
- Once the required approvals are obtained, the nomination will be reviewed by the Staff Awards and Recognition Committee and the top 5 recommendations will be submitted to the President.
- The final recipient(s) will be selected by the President.

If you have questions regarding the nomination process, please contact **Human Resources** at Anh.LePalomino@untsystem.edu or (940) 565-4363.

STEP ONE: Nominee and Nominator Information - Please provide the following information for both the nominator and employee being nominated for the reward.

	Name	Employee ID (if known)	Department	Job Title	Affiliation to Nominee
Nominator:					
Nominee:					

STEP TWO: Give specific examples of how the nominee has met the following award criteria:

- Goes above and beyond the call of duty in delivering an exceptional customer experience and serves internal and external customers with superior professionalism and care.
- Serves as an exemplary role model in the management of a wide range of administrative responsibilities in the workplace, having a positive impact beyond the immediate work group/department.
- Demonstrates creativity or resourcefulness in proactively identifying and eliminating barriers in processes, communication, or other operational functions.
- Consistently seeks continuous improvement and collaborates effectively with others to implement process or service improvement initiatives to advance the mission of the university.
- Develops and maintains positive relationships with students, faculty and staff members across campus and contributes to a culture of optimism and positivity within the organization. **(500 word limit)**

Submit to HR

For Administrative Use Only

1. Human Resources

Signature _____

Printed Name _____

Date: _____

APPROVED - NOMINEE MEETS ALL ELIGIBILITY

DENIED - NOMINEE DOES NOT MEET FOLLOWING ELIGIBILITY:

Has not been in a retirement-eligible staff position for six consecutive months

Do not hold a position in Administrative Professionals area

Has received the Administrative Professionals Award within the past three years

Has received formal disciplinary action or performance improvement plan within twelve months of nomination date

2. Direct Supervisor

Signature _____

Printed Name _____

Date: _____

APPROVED DENIED – REASON: _____

3. Department Head / Dean

Signature _____

Printed Name _____

Date: _____

APPROVED DENIED – REASON: _____

4. VP Coordinator

Signature _____

Printed Name _____

Date: _____

APPROVED DENIED - REASON: _____

5. Staff Awards and Recognition Committee

Date: _____

RECOMMENDED

DENIED - REASON: _____

6. President: SELECTED

Signature _____

Date: _____