

Experiential Learning Scholars Program

EXL Award Nomination Form

Nominee Information:

Name: _____ M # (student): _____

E-Mail: _____ Phone: _____

Category of Award:

_____ Outstanding Student Award

_____ Outstanding Faculty Award

_____ Outstanding Administrator Award

_____ Outstanding Community Participant Award

Nominated by:

Name: _____ Position/Title: _____

E-Mail: _____ Phone: _____

Provide your rationale for giving and EXL award to the person nominated.

** Nominees will be asked to submit documentation supporting their nomination.