

**Employee of the Quarter
Award Nomination Form**

Name of Nominee:

Region (Americas/Europe/HQ/Pacific):

District (if applicable):

School (if applicable):

By signing this form, I affirm the employee worked in their current DoDEA position for the entire quarter on which the nomination is based.

Nomination submitted by (printed/typed name): _____

Supervisor of Nominee

Nomination submitted by (signed): _____

By signing this form, I nominate this **one** nominee for Employee of the Quarter.

Nomination submitted by (printed/typed name): _____

District Superintendent or Division Chief, GS-15 or above

Nomination approved by (signed): _____

Completed forms are due by the first Friday of the following calendar quarter (first Friday in April, July, October, and January.) Send completed forms to the DoDEA Awards Program Manager at Erin.Kilkowski@dodea.edu
Questions for Erin? Call DSN 372-0766 or (571) 372-0766 or email above.

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Justification

The award justification is limited to two-pages, single spaced, with 5-6 bullet points. The justification should include specific examples of performance or service that are exceptional when measured against position requirements. It should also explain how the performance or service exceeded those of others with comparable responsibilities, and also include the employee's title, series, grade, and a brief description of the nominee's duties and responsibilities. Statistical information and/or monetary savings information should be included, when applicable. (Limit 2000 characters, may be continued on next page)

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Justification (continued, if needed - limit 2000 characters)

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