

**IOWA STATE UNIVERSITY  
COLLEGE OF ENGINEERING**

Nomination Form

**SUPERIOR ENGINEERING EXTENSION AWARD**

In recognition of demonstrated superior extension performance as shown by responsiveness to client needs, innovative and resourceful programming, appropriate use of delivery methods, client satisfaction, and dedication to the extension mission of the College of Engineering. There should also be evidence of participation in, and contributions to, extension related activities on-campus and beyond through service collaboration and/or publications. The award will not be given in years when outstanding achievement, though meritorious, does not meet the qualifications.

Eligibility:

1. Any College of Engineering faculty member is eligible who has made substantial contributions to the extension, outreach, and technology transfer mission of the University. Extension appointments are not required.
2. May receive this award more than once, with at least a five-year interval between awards.

Award: Recipient receives a \$500 honorarium and a plaque.

Name of Nominee: \_\_\_\_\_ Position: \_\_\_\_\_

Department or Curriculum: \_\_\_\_\_

University Address: \_\_\_\_\_

Telephone: (    ) \_\_\_\_\_ Fax: (    ) \_\_\_\_\_ Email: \_\_\_\_\_

Supporting Information:

1. Citation. A brief statement, not to exceed 100 words, giving the major accomplishments for which the award is being made.
2. Rationale for nominations. A summary, not to exceed two pages, on why the faculty member is being nominated for the award. Cite specific examples of relevant activities whenever possible.
3. Curriculum vitae. Provide information about the nominee's education, record of positions held, professional society activities and offices, government service, publications, papers presented, patents and previous awards and recognition.
4. Supporting letters. Include no more than two supporting letters from colleagues at ISU and three from clientele.
5. Other materials. Include other material when deemed desirable. However, voluminous nominations are not useful.

Submitted by: \_\_\_\_\_ Date: \_\_\_\_\_

Department and address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_