

# 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 an EXL award to the person nominated.

\*\*Faculty and Student Nominees will be asked to submit documentation supporting their nomination.