

DISTINGUISHED ALUMNUS/A AWARD NOMINATION FORM

Nominee's Information Full Name Address ___ City/State/Zip ___ Day Phone _____ _____ Email____ Milligan class of _____ (if applicable) Employer _____ Position ____ Employer's address_____ City/State/Zip _____ Please list nominee's degrees and/or certifications. What outstanding contributions has the nominee made to his/her profession? List any awards or honors nominee has received for his/her personal and professional contributions and accomplishments. Milligan's vision statement is "Where Jesus Christ is exalted and excellence is the standard." How has the nominee embodied this statement in his/her personal and professional life? How has the candidate brought distinction to Milligan University? What else would you like us to know about this nominee? Nominator's name

Day Phone _____ Email____