# 2015 Association of Office Professionals Member of the Year Award

The Oregon State University Association of Office Professionals was formed to foster awareness, excellence, and professionalism in the ranks of office personnel. This award recognizes contributions toward these goals by individual members through creative approaches and consistently high performance as a professional in ways that benefit Oregon State University.

# Who is eligible?

A nominee must be an active AOP member and have participated in AOP related activities within the last two years. AOP members and supervisors of AOP members are encouraged to submit nominations. Excluded from consideration are members of the AOP Awards and Recognition Committee.

### How to nominate?

To nominate an AOP member for this award, submit your completed packet by April 24, 2015 either electronically or in person to:

Laurie Wyant AOP Awards and Nominations Committee Chair 213 Gilkey Hall

Laurie.Wyant@oregonstate.edu

### What is a complete nomination packet?

The complete packet shall include a nomination form and two letters of support. Each letter of support shall not exceed two pages in length with 1" margins, minimum 12 point font. Letters should include examples of professionalism, involvement with AOP, and service to the department, Oregon State University, and the community. One of the two letters should be from a co-worker or supervisor.

Sponsored by the Oregon State University Association of Office Professionals Oregon State University Association of Office Professionals 2015 MEMBER OF THE YEAR AWARD Nomination Form Deadline: Friday, April 24, 2015

I nominate

Name:

Title:

Department:

Phone number:

Please type or keyboard the answers to these questions and attach:

- 1. In what capacity have you known the nominee?
- 2. What is your nominee's activity/involvement in AOP? (Mention all that apply)
  - □ Luncheons
  - **Committee work**
  - Conferences
  - □ Committee chair
  - □ Officer or board member
  - Other \_\_\_\_\_\_

#### For verification and/or further information, please contact:

Nominators' name(s):

# Title(s):

### Department:

Phone:

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