NOMINATION FORM FOR COLLEGE OF LIBERAL ARTS AND SCIENCES
Professional Adviser Award

Nominations **MUST** be received by **November 17, 2017**

1. Name of adviser you are nominating (nominee)______________________________

2. Department of nominee ________________________________

3. Person making nomination is
   a) former student ______
   b) chair ______
   c) faculty member ______
   d) univ. admin. ______
   e) self ______

4. You may return this form to Arlene Williams in 2014 Turlington Hall or mail it to her as shown below:

   by campus mail: Arlene Williams
   P.O. Box 117300

   by U.S. Mail: Arlene Williams
   2014 Turlington Hall
   PO Box 117300
   Gainesville FL 32611-7300

   by email: arlenew@ufl.edu

The identity of the person making this nomination will remain confidential.

5. Your name (please print) ________________________________

6. Signature ________________________________