



**JILL MATUS EXCELLENCE IN STUDENT SERVICES AWARD  
Nomination Form**

**APPLICATION INSTRUCTIONS AND CHECK-LIST**

Please complete this form and attach the following:

- ☐ Cover letter from nominator addressing the selection criteria outlined in the award description
- ☐ Complete curriculum vitae for the candidate
- ☐ One (1) letter of endorsement from the nominee's supervisor or department head, ***only if the nominator is not the nominee's supervisor***
- ☐ Two (2) letters of support from colleagues/peers/students

**NOMINEE INFORMATION**

Title: \_\_\_\_\_ First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Faculty/Department \_\_\_\_\_

Address 1 \_\_\_\_\_ Address 2 \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ Email: \_\_\_\_\_

**NOMINATOR INFORMATION**

Title: \_\_\_\_\_ First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Faculty/Department \_\_\_\_\_

Address 1 \_\_\_\_\_ Address 2 \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ Email: \_\_\_\_\_

**Reason for Nomination (section must be completed; min. 75 characters, max. 300 characters):**

**NAMES AND CONTACT INFORMATION FOR INDIVIDUALS (OTHER THAN SUPERVISOR OR DEPARTMENT HEAD) WHO ARE PROVIDING SUPPORT LETTERS**

1. Title: \_\_\_\_\_ First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Job title and company name, or position and faculty/department if employed at U of T

\_\_\_\_\_

Phone \_\_\_\_\_ Email: \_\_\_\_\_

2. Title: \_\_\_\_\_ First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Job title and company name, or position and faculty/department if employed at U of T

\_\_\_\_\_

Phone \_\_\_\_\_ Email: \_\_\_\_\_

3. Title: \_\_\_\_\_ First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Job title and company name, or position and faculty/department if employed at U of T

\_\_\_\_\_

Phone \_\_\_\_\_ Email: \_\_\_\_\_

Has this nomination been submitted before?

☐ YES ☐ NO

If yes, please provide the year(s) it was submitted.

\_\_\_\_\_

Has the nominee been informed of this submission?

☐ YES ☐ NO

Please submit an electronic (PDF) copy of the complete nomination package to  
**[awardsofexcellence@utoronto.ca](mailto:awardsofexcellence@utoronto.ca)** by December 6, 2017 to the attention of:

**Jill Matus Excellence in Student Services Award Selection Committee c/o  
Alumni Relations, Division of University Advancement**