Information Cover Page

National Awards Program for Excellence in College & University Teaching in the Food & Agricultural Sciences

USDA - National Institute of Food and Agriculture

Enter requested data in the appropriate fields on both pages and save as noted in the published guidelines.

Nominee's Name (First, Middle, Last): _____

Institution: _____

Department: _____

Address: _____

(Physical Street Address, **No P.O. Boxes**)

_____

(City, State, Zip Code)

Telephone: _____ **E-Mail Address:** _____

Award Category to which Nominee is Applying (National/Regional, Early Career, or Teaching and Student Engagement (**no more than** seven consecutive years in teaching)

Nominee's Primary Undergraduate Teaching Area: _____

Nominee's Current Teaching Appointment (%):

Nominee's Administrative Unit (select one): Agriculture

If "Other," please specify: _____

Type of Organization (See "*Definitions*," *Section I*): Land Grant

If a minority-serving institution, click and select: Not Applicable

Approval of Nomination by Nominee's Department Chair & Dean

Department Chair's Name: _____

Unit Name: _____

Address: _____

(Physical Street Address, **No P.O. Boxes**)

_____

(City, State, Zip Code)

Dean's Name: _____

Unit Name: _____

Address: _____

(Physical Street Address, **No P.O. Boxes**)

_____

(City, State, Zip Code)

By submitting this application, we certify that all of the information is factual and correct to the best of our knowledge. Furthermore, we understand any false or misleading statements may be grounds for disqualification.

Personal Data Page

1. Education (Begin with baccalaureate or first professional degree and include postdoctoral training.)

Institution	Degree/Certification	Year Conferred	Field of Study/Major

2. Professional Experience (Begin with present position; list employment by title, affiliation, and dates.)

Position Title	Organizational Affiliation	Dates

3. Teaching Assignments (Begin with current year; list all recent classroom teaching activity.)

Course Title	# of Credit Hours	Lecture/Lab	Percentage of Responsibility	Academic Level	# of Students	Year(s) Taught, (YYYY-YYYY)

Which system does your institution utilize; please select one: **Semester** ○ **Quarter** ◉

Evaluation Criteria #1-5

The following ten pages are for responses to Evaluation Criteria #1-5. Responses should be organized by Evaluation Criterion number, and include the criterion title (e.g., "Criterion #1. Teaching Quality Assessment" as found in Section III of the published "Submission Guidelines.") **Please Note:** Charts, graphs, or other non-text information cannot be included in this .PDF file, but it may be submitted as a separate attachment (see web Nomination Guidelines for additional instructions). This attached template file (Attachment #1) must not exceed 12 pages (Information Cover Page, Personal Data Page, and 10-page Responses to Evaluation Criteria #1-5). Responses to **Evaluation Criterion #6. Endorsement by Administrator, Alumnus, and Colleague** (Letters of Support) should **not** be included in this Attachment #1, but sent as a separate Attachment #2.