(University/Departmental Letterhead)

Student Name

Student Email Address:

Supervisor Name

Supervisor Email:

Student Position Title:

Department Where Student Position is Held:

Briefly describe why you are submitting this student for recognition.

Briefly outline your student employee’s accomplishments over this past year and/or how they have contributed to the work place.

How does this student exhibit NACE competencies in their position? (See attached outline). Please provide specific examples.

Closing statement.

Signature of person submitting.