

## Oklahoma Department of Corrections EMPLOYEE AWARD NOMINATION FORM

\*\*\*PLEASE USE A SEPARATE FORM FOR EACH NOMINATION\*\*\*

**Nominee:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Job Title/Position:** \_\_\_\_\_

**Facility/District/Unit/Division:** \_\_\_\_\_

**AWARD FOR WHICH EMPLOYEE IS BEING NOMINATED (Select only one):**

- |  |   |
|--|---|
| <input type="checkbox"/> CORRECTIONAL OFFICER OF THE YEAR            | <input type="checkbox"/> MEDAL OF VALOR       |
| <input type="checkbox"/> CORRECTIONAL OFFICER SUPERVISOR OF THE YEAR | <input type="checkbox"/> EMPLOYEE OF THE YEAR |
| <input type="checkbox"/> PROBATION AND PAROLE OFFICER OF THE YEAR    | <input type="checkbox"/> MERITORIOUS SERVICE  |

Describe the reason(s) why you believe this employee(s) should be selected to receive the award.

**Correctional Officer/Correctional Officer Supervisor of the Year  
Probation and Parole Officer of the Year**

**Employee of the Year:** List education, agency career summary, civic activities and professional memberships. What overall contribution has this employee made to the work unit or agency? Has the employee been responsible for any special innovations or creative efforts? What personal characteristics or professional contribution does this employee bring to the job?. Additional information may be attached on a separate sheet.

**Medal of Valor/Meritorious Service:** Provide a detailed summary of the event; in addition, related reports, memorandums and/or news articles that document this event may be attached.

\_\_\_\_\_  
(Printed Name of Nominator)      (Signature)      (Facility/District/Unit)      (Date)

\_\_\_\_\_  
(Facility/District/Unit Head Signature/Date)      (Division Administrator Signature/Date)