The Mayor's Award of Excellence recognizes employees who consistently provide outstanding service and work that demonstrates exemplary personal commitment to the City of Lincoln.

Eligibility: All employees are eligible except Directors, Mayoral Aides, and elected officials. Individuals or teams of employees are eligible. Entire Departments, Divisions or Sections are not eligible as a team.

Please submit completed nomination forms to the City Human Resources Office by the fifth day of the month for the following month's award.

Nominee __________________________ Job Classification Title __________________________

Department __________________________ Division __________________________

When did this accomplishment occur? __________________________

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I wish to nominate this employee/team in the following category/ies based on the following criteria:

<table>
<thead>
<tr>
<th>Category/ies</th>
<th>Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>_____ Safety</td>
<td>This nominee practices safety on the job and promotes and encourages others to do the same.</td>
</tr>
<tr>
<td>_____ Productivity</td>
<td>This nominee always gives the best of oneself and encourages and promotes co-workers to perform their best.</td>
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<tr>
<td>_____ Loss Prevention</td>
<td>This nominee demonstrates wise use of City resources and makes recommendations that result in substantial savings to the City outside the normal course of expected job functions.</td>
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<tr>
<td>_____ Customer Relations</td>
<td>This nominee represents the City with a positive attitude, takes pride in one's work, and encourages co-workers to do the same.</td>
</tr>
<tr>
<td>_____ Valor</td>
<td>This nominee performs an act of bravery, which may include life-saving, above and beyond the call of duty.</td>
</tr>
</tbody>
</table>

On page 2 of this form, please describe the nominee's accomplishments that best identify why this employee should receive the Mayor's Award of Excellence.

Please print the following information about yourself:

Name __________________________________________ Date __________________________

Department __________________________ Work/Day Telephone __________________________

Approved/validated by:

_____________________________________________  ________________________________
Your Signature                                  Department Director
Nominee ____________________________

Describe specifically the nominee's accomplishments that best describe why this employee should receive the Mayor's Award of Excellence. Please use the following questions as a guide to help you complete your description.

How does this accomplishment specifically impact the City with regards to money savings? (Describe dollar amount, hours, compensation, etc.)
Was this accomplishment self-initiated?
Was this accomplishment outside of this person’s job description? If yes, please describe. If no, be very specific as to how they did a superior job within the job description of their position. (Attach additional sheets if needed)

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