

Appendix E2:

Application Form for the
DISTINGUISHED FACULTY •

D E d K Z AWARD

Information:

Name: _____

Department: _____

College: _____

Phone No. _____

Email: _____

Checklist of materials submitted:

A completed Application Form

Up to a total of ten letters of support addressing the quality of advising of the nominee from faculty, students, and/or alumni

A 3-5 page summary statement



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