**NOMINATING FORM for the**

**CHANCELLOR’S ACADEMIC PROFESSIONAL EXCELLENCE AWARD (CAPE)**

The nominator must complete and submit this form together with the nominator’s recommendation to one of the **CAPE** chair listed below. Please attach a resume and job description. It is the responsibility of the nominator to see that the required letters of support are also forwarded to the chair. **The nominator’s narrative and the three to five letters of support, along with job description and resume of nominee must be received no later than** noon on June 28, 2019. Completed nomination materials may be sent as faxes, email, or hardcopy.

# 2019 CAPE SELECTION COMMITTEE CHAIR

Ahlam Al-Kodmany, PhD Associate Director, Administration

UI Cancer Center

818 S. Wolcott Street, 409 SRH (M/C 709)

Chicago, IL 60612

(312)355-6207 Fax (312) 355-5034

[ryyan@uic.edu](mailto:ryyan@uic.edu)

**ALL REQUIRED MATERIALS MUST BE RECEIVED NO LATER THAN NOON on FRIDAY June 28, 2019**

# PLEASE PRINT

**NOMINEE**

Last name first name

# TITLE

**DEPARTMENT**

**M/C**

**NOMINATOR**

Last name first name

# TITLE

**DEPARTMENT**

**M/C**

**E-MAIL**

**PHONE NUMBER**

**SIGNATURE OF**

**NOMINATOR**

**DATE**

Please list the names of the individuals who will provide supporting letters on the following page, both parts of the Nominating Form must be submitted by June 28, 2019.

**NOMINATING FORM for the**

**CHANCELLOR’S ACADEMIC PROFESSIONAL EXCELLENCE AWARD (CAPE)**

**Please print all information**

**CAPE NOMINEE**

Last name first name

# NOMINATOR

Last name first name

**INDIVIDUALS PROVIDING LETTERS OF SUPPORT; LETTERS MUST BE RECEIVED NO LATER THAN NOON on FRIDAY, June 28, 2019**

(at least three names required, no more than five names accepted)

# Name

Last name first name

# Department

**M/C**

**EMAIL:**

**Name**

Last name first name

# Department

**M/C**

**EMAIL:**

**Name**

Last name first name

# Department

**M/C**

**EMAIL**

**Name**

Last name first name

# Department

**M/C**

**EMAIL:**

**Name**

Last name first name

# Department

**M/C**