

City Of Pomona

EMPLOYEE RECOGNITION AWARD

EMPLOYEE NOMINATION FORM

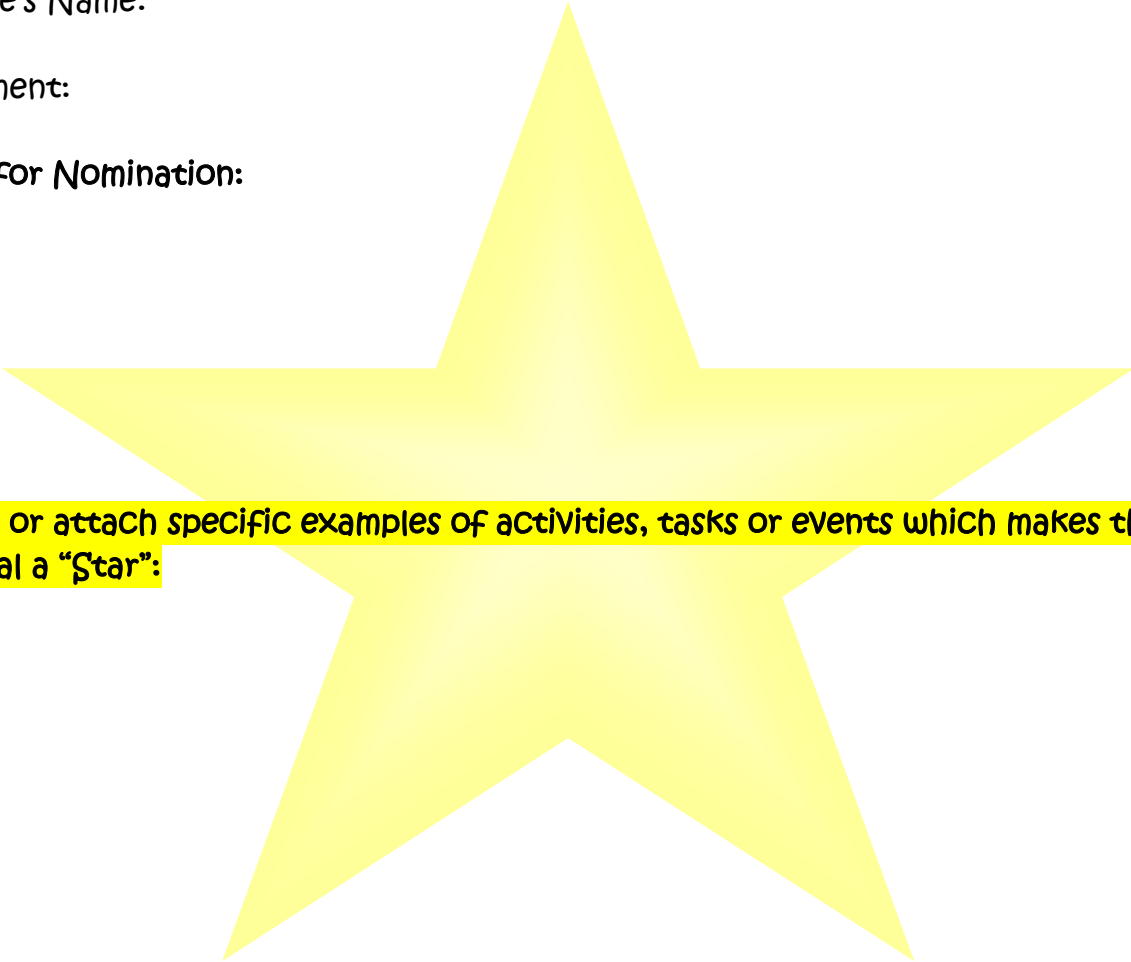
Nominate one (1) employee per form

Date:

Employee's Name:

Department:

Reason for Nomination:



List and or attach specific examples of activities, tasks or events which makes this individual a "Star":

Name of Nominator:

Telephone No:

Signature of Nominator: _____

SUBMIT TO: THE HUMAN RESOURCES DEPARTMENT

If you are mailing this form, please mail to: City of Pomona

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Email: Sandra_piva@ci.pomona.ca.us