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| Chi Epsilon SigmaChi Epsilon Sigma**CHI EPSILON SIGMA – BETA CHAPTER****SUPPORT STAFF MEMBER OF THE YEAR****NOMINATION FORM****(4 years minimum employment)** |
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| Nominee |  | Title |
|  |  |  |
| County |  | District |
| **Why do you feel this employee is deserving of the award?****(Please include any supporting documents, if available.)** |
|  |
| Nominated by: |  |  |
| County & District: |  |  |
|  |
| **Complete and e-mail, fax, or mail by April 1 to:****Ginger Ellison****P.O. Box 430****Mt. Ida, AR 71957** **gellison@uaex.edu****(870) 867-2311**(Please ask the person you nominated to submit a Support Staff Member of the Year Biographical Information Form.) |