



Bloomfield College Portrait of Excellence Nomination Form

NOMINATOR INFORMATION

Today's Date: _____

Name of Person Completing Form: _____

Please check one for your College affiliation:

Faculty

Administration

Staff

External Organization

If other than Bloomfield College, name and address of organization is required:

Organization Name: _____

Address: _____

Phone Number: _____

Email of Contact Person: _____

NOMINEE INFORMATION

Name of Student Nominee: _____

Student ID Number: _____

Student's Cumulative GPA: _____

Student's Major: _____

Student's Year in School: _____

Phone Number: _____

Email: _____

REASON FOR NOMINATION

How long and in what capacity are you familiar with the nominee?

Please check a box that best describes this student for each question listed below.

	Extremely High	High	Not Certain	Low	Very Low
Nominee's demonstration of personal/professional integrity					
Nominee's demonstration of respect for the diversity of others					
Nominee's demonstration of commitment to service and volunteerism					
Nominee's demonstration of appreciation and awareness of the performing, literary and visual arts					
Nominee's demonstration of communication skills					
Nominee's demonstrations of ability to problem solve					
Nominee's demonstration of ability to use technology and other Technical skills					

Briefly describe what the nominee has achieved to be deserving of this highly distinguished acknowledgement. Share specific examples and provide all supportive documents available (IE. Pictures, article from a local paper, quotes from recipients of nominee's services, etc.)

