EMPLOYEE RECOGNITION PROGRAM Individual - Nomination Form			
Nominee's Information Name: Emp	bloyee ID#:		
Current Civil Service Title:			
Current Office Title:			
Current Work Location (department, unit, or borough/development):			
Name & Office Title of Direct Supervisor:			
Name & Office Title of Director, VP, EVP:			
1. Describe the nominee's duties and responsibilities.			
2. What actions made the nominee's job performance stand out amongst other employees? Please provide examples.			
3. Provide examples of how the nominee exhibited good customer service.			
Nominator Information			
Name & Title: D	Date:		
Current Work Location: Email:			
Phone Number:			

Send completed forms via e-mail to employee.engagement@nycha.nyc.gov



EMPLOYEE RECOGNITION PROGRAM Team/Unit/Development/Department - Nomination Form

Team Information: List names and civil service and office titles for each team member.

Current Work Location (department, unit, or borough / development): ______

Name & Office Title of Direct Supervisor: _____

Name & Office Title of Director, VP, EVP: _____

1. Describe the team's duties and responsibilities.

2. What actions made the team's job performance stand out. Please provide specific examples.

3. Provide examples of how the team's actions demonstrated good customer service, improved a situation or problem, or contributed to NYCHA's mission.

Nominator	Information
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Name & Office Title:	Date:	Date:	
Current Work Location:	Email:		
Phone Number:			

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