

**BLISSFIELD COMMUNITY SCHOOLS**



**EMPLOYEE OF THE MONTH NOMINATION FORM**

**EMPLOYEE NAME:** \_\_\_\_\_

**POSITION:** \_\_\_\_\_

**NOMINATED BY:** \_\_\_\_\_

**SIGNATURE OF PRINCIPAL/PROGRAM DIRECTOR (REQUIRED):** \_\_\_\_\_

To be eligible for nomination, the staff member should have exemplary overall job performance and involvement in a specific activity.

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**SPECIAL PROJECT (Brief Description):**

**ACHIEVEMENTS/OBSTACLES OVERCOME:**

**AWARDS (inside or outside of school):**

**OTHER INFORMATION:**