|  |  |  |  |
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|  | **Nomination Form** **POST Excellence in Training Award****Application for Nominees** |  | [**POST Home**](http://www.post.ca.gov/)[**California Home**](http://ca.gov/) |
| [**Section 1 − Nominee**](#Section1)[**Section 2 − Nominator**](#Section2)[**Section 3 − Justification**](#Section3)[**Section 4 − Documentation**](#Section4) |
| **Section 1. Nominee Information** |
| **1. Award Category** (select one only) | [ ]  **Individual**  [ ]   **Lifetime**  [ ]   **Organizational** |
| **2. Nominee** |       |
| **3. Title** (if applicable) |       |
| **4. Agency/Organization** (if applicable) |       |
| **5. Mailing Address** | Street |       |
|  | City |        |
|  | State |    |
|  | Zip |       |
| **6. Contact Numbers** | Voice | (     )     -      | Ext      |
|  | Cell | (     )     -      |
|  | Fax | (     )     -      |
|  | Email |       |
| **Section 2. Nominator Information** |
| **7. Name** |       |
| **8. Title** |       |
| **9. Agency/Organization** |       |
| **10. Mailing Address** | Street |       |
|  | City |        |
|  | State |    |
|  | Zip |       |
| **11. Contact Numbers** | Voice | (     )     -      | Ext      |
|  | Cell | (     )     -      |
|  | Fax | (     )     -      |
|  | Email |       |
| **12. Department Head/CEO** | Name |       |
|  | Title |       |
| **13. Signature** | **►** |
|  |  Executive Signature ― **Required** |  | Date |
| **Complete all remaining sections. Attach additional pages if needed.**[**Section 3 − Justification**](#Section3)[**Section 4 − Documentation**](#Section4)[**How to Submit**](#Submit) |

| **Nomination Form: POST Excellence in Training Award****Application for Nominees** |
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| [**Section 1 − Nominee**](#Section1) [**Section 2 − Nominator**](#Section2) [**Section 3 – Justification**](#Section3) [**Section 4 − Documentation**](#Section4) |
| **Section 3. Justification for Nomination ― REQUIRED**  |
| **14. Describe the individual’s or organization’s purpose and training responsibility.** |
|       |
| **15. Describe the nominee’s overall achievement.** |
|       |
| **Section 3. Justification for Nomination *continued***  |
| **16. Give explanations for each of the following three criteria to support your nomination.** |
| **a) Innovation** |
|       |
| **b) Impact** |
|       |
| **c) Reputation/Recognition** |
|       |
| **Section 4. Support Documentation ― REQUIRED**  |
| **17. Provide a brief list of any supporting documents included with this application.** |
|       |
| **To complete your application:**1) Make sure you have filled in all applicable sections. 2) Print and sign form.3) Attach all supporting documents.4) Send your completed application to:  |
|  | **Excellence in Training Screening Committee****c/o California POST****Executive Office****860 Stillwater Road, Suite 100****West Sacramento, CA 95605** |
| Application questions: 916.227.3935 ― Jim Grottkau |

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