



Team Award Nomination Form

TO: HUMAN RESOURCES DEPARTMENT

Employees Being Nominated for Award: _____
NOTE: Temporary, Contract, and Probationary employees are not eligible (Please print first and last names)

Employee Nominating the Above Person for the Award: _____

Department Director Approval: _____ Department: _____ Date: _____

TEAM AWARD CRITERIA

The Team Award recognizes outstanding teamwork within a group of employees (2 or more) who share a commitment to a common goal and who work together to achieve specific objectives. The award promotes the spirit of teamwork within departments, across the organization or between units. One award is given each year.

Nominations must be accompanied by a written description detailing the nominated team's exemplary performance. Award decisions are based solely on this description, so please provide plenty of detail.

- **Teamwork**

Please describe an event and/or outcome(s) that shows how the team displayed outstanding leadership qualities through teamwork, promoting employee morale, cooperation and respectful treatment of others.

- **Problem Solving Skills**

Please describe an event and/or outcome(s) that show how combining the team's talents of traditionally separate units, actively demonstrated a willingness to encourage teamwork in the workplace.

- **Outstanding Performances and Results of Team Achievements**

Please describe how the team's project enhanced the City of Vernon and/or contributed to the department's established goals and priorities.

- **Significance**

Please describe the project implemented by the team that resulted in significant organizational change or practice that increased productivity and has the potential to be replicated or adapted in other City departments.

- **Additional Information**

November 5th is the deadline for all nominations, and forms must be received by the Human Resources Department by this date.

Official Use Only Below

The above mentioned candidate has been: ____ selected _____ non-selected

Human Resources Approval _____ Date: _____

City Administrator Approval _____ Date: _____