

NOMINATION FORM

The OPM Director's PILLAR Award

Please enter all information requested and attach a full description of the nominated practice. *The description must address each of the mandatory criteria for the award and should include information about any additional qualifying factors.*

Nominations are due May 17, 2002

1. What are the name and address of the submitting agency, department, or organization?	Name: Address:
2. What is the performance management practice you are nominating?	Name or type of practice: Brief description (NOTE: Please be very brief here. Attach your complete description to this form.):
3. What are the name, address, telephone number, fax number, and email address of the person we should contact if we need further information (i.e., an informal contact)?	Name: Address: Phone: Fax: Email Address:
4. What are the name, title, address, telephone number, fax number, and email address of the appropriate agency official to whom we may send formal correspondence?	Name: Title: Address: Phone: Fax: Email Address:
5. Servicing Human Resources Office Endorsement:	Signature of Servicing Human Resources Officer: