Virginia Commonwealth University School of Nursing
Clinical Faculty/Adjunct Faculty/Preceptor Award
Nomination Form

This award is given to a clinical faculty member, adjunct faculty member or preceptor to recognize superior service or contributions to the School of Nursing.

Name of Nominee and Category of Appointment: _____

Length of Service:_____

Name of Nominator: _____

Please state how the nominee meets the criteria for this award (use separate sheet(s) as necessary).

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