

NOMINATION FOR MONETARY, TIME-OFF, OR NON-MONETARY AWARDS

Nominee Name:

Date:

Title:

Pay Plan/Series/Grade:

CMD/Dept:

Time Frame Covered:

Has nominee received a monetary or time-off award this Fiscal Year? If yes, describe.

Provide justification for this award. Use additional sheets if needed.

Recommended award:

Individual or group?

(If group, more than 3, attach list of nominees)

Monetary amount: \_\_\_\_\_ Number of hours: \_\_\_\_\_

Estimate of benefits (refer to enclosure (5) for guidance).

Moderate:

Change or modification of an operating principle or procedure with limited use or impact.

Substantial:

Substantial change or modification of procedures. Important improvements to the value of a product, activity, program, or service to the public.

High:

Complete revision of a basic principle or procedure; a highly significant improvement to the value of a product or service.

Exceptional:

Initiation of a new principle or major procedure; a superior improvement to the quality of a critical product, activity, program, or service to the public.

Nominated by:

Approved by:

Forward completed form to CNATRA (N121) or Wing MSS as appropriate for further action.

Enclosure (3)