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| Name of Governor’s Award Nominee | Title or Position |
|  |  |
| Department | Division |
|  |  |

**Nomination submitted by:** (nominations may be submitted by any State of Montana employee.)

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| --- | --- |
| Your Name  | Title or Position |
|  |  |
| Department | Division |
|  |  |
| Work Address | City | State | Zip |
|  |  |  |  |
| Work Phone | Work Email |
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**INDIVIDUAL AWARD NOMINATION CRITERIA:**

**Each individual nomination will be evaluated regarding how the individual clearly met or exceeded the award criteria.** **Concrete examples, measurable outcomes, specific actions taken, and the results achieved must be listed that demonstrate how the nomination criteria were met. If the detailed information is not included with a nomination, it will not be considered for the Governor’s Award for Excellence in Performance.**

To nominate an individual, the individual must perform above and beyond the regular expectations of the person’s job and a detailed explanation must be provided that identifies how the individual met or exceeded one or more of the following criteria:

* Demonstrate exceptional innovative approaches which produce significant results.
* Attain significant improvements with efficiencies in government processes (e.g., significantly improved productivity or significant cost savings),
* Demonstrate exceptional customer service that is significantly beyond the scope of the employee’s performance.

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| **Reason for Nomination:**Please describe the nominee’s outstanding accomplishments detailing the concrete examples, measurable outcomes, specific actions taken, and the results achieved to meet the nomination criteria listed above: (100 words or less) |
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**Submission Instructions:** Please submit this completed nomination form **to the nominee’s Human Resources department**. To find the nominee’s HR department contact information, follow this link: <https://hr.mt.gov/Programs/govawards/>.

**Nomination forms must be received by Friday, August 1, 2025, to be considered for the Governor’s Award.**