



Employee Nomination Form

Nomination Guidelines

1. To nominate an employee, please complete this form and return it by email to QualityCountsNominations@hochunkinc.com
2. Nominations may be submitted by customers, corporate employees, coworkers or self nomination.
3. Nominations will be due 5 business days after each quarter ends.
4. You may nominate one person per quarter.

Employee Information

Employee Name:

Date:

Employee ID:

Job Title:

Manager:

Division:

Period of Performance

1st Quarter

2nd Quarter

3rd Quarter

4th Quarter

Annual

This exceeded expected performance as identified in the current position description by improving:

CUSTOMER SERVICE
COMMUNITY

QUALITY

EFFICIENCY

INVOLVEMENT

Other : _____

As a Result

Description of Action:

Nominator Signature

By signing this form, you confirm that you have nominated a candidate who meets the Quality Counts employee recognition program criteria.

Signature

Date

For Committee Use Only

Approved By: _____

Award Date: _____