A. PURPOSE
To inform those who wish to submit a nomination for an honorary degree for review by UNLV's President and, if approved, the NSHE Board of Regents.

B. PROCEDURES
1. Nominations and supporting documents are to be submitted through your dean or vice president.

2. Complete an Honorary Degree Nomination Form as fully and accurately as possible to validate the award request. (The Nomination Form is the next page of this document.) Include the following supporting documentation:
   - Nominated individual’s C.V. or resume
   - Letter of nomination (if it does not fit on the form)
   - Board of Regents Agenda Request (third page of this document)
   - Supporting documentation to highlight the significance of the individual’s contribution(s).

3. Submit form and supporting documentation to dean or vice president, who will then submit it to the Office of the Executive Vice President and Provost, attention Sandra Gajkowski. The form and documentation will be reviewed and the submitter will be contacted if further information or clarification is required.

4. The President will review the nomination and, if approved, the Office of the Executive Vice President and Provost will submit it to the Board of Regents for consideration.

5. The Board of Regents reviews nominations for honorary degrees twice annually. The due date for nominations can be obtained by contacting the Office of the Executive Vice President and Provost at extension 53301.

C. RESPONSIBILITY
Deans and vice presidents have responsibility for submitting nominations and supporting documents.
Honorary Degree
Nomination Form

1. Degree to be Awarded:
   ____Honorary Doctorate   ____Honorary Baccalaureate   ____Honorary Associate

2. Please state the name and address of your nominee for an Honorary Degree:


3. Honorary degrees may be awarded to persons who have made significant contributions to the improvement of the quality of academic programs and academic life at the requesting institution, or to distinguished visitors. Person currently holding public elective office shall not be eligible to be nominated for an honorary degree, except that the Board of Regents reserves the right to waive this limitation at its own discretion in extraordinary circumstances.

4. What are your reasons for nominating this person (Attach additional pages, if necessary.)


President                                   Date

Institution                                 Date

(B/R 1/87, 10/98, 3/03; Added 6/05; A.3/07, 11/07, 12/07)
Board of Regents
Nevada System of Higher Education

Agenda Item Request

1. Was item reviewed by Campus System Counsel? Yes: [ ] No: [ ]

2. The briefing paper and reference documents have been reviewed and contain no confidential information (e.g., social security numbers, information protected by FERPA or HIPAA). Yes: [ ] No: [ ]
   Name: ____________________  Title: ____________________

3. If request is for a Handbook or Procedures & Guidelines Manual revision, has it been reviewed by the Associate Vice Chancellor of Academic and Student Affairs prior to its submission to the Board office? Yes: [ ] No: [ ]

4. Submitted by: ____________________
   (President’s signature required for institutional submissions)

5. Contact Person: ____________________  Phone Number: ____________________

6. Meeting date: ____________________

7. Agenda Item Title: ____________________

8. Select one: ____________________
   Board Main agenda: [ ]
   Board Consent agenda: [ ]
   Committee agenda**: [ ]  Committee Name: ____________________
   **Please Note: Committee agenda items are due to System Administration staff one week prior to deadline for submitting main Board agenda items.

9. Will this item have reference material in addition to the briefing paper? Please include reference material at time of submission. Yes: [ ] No: [ ]

10. Will audio/visual presentation for this item be required**: Yes: [ ] No: [ ]
    **Audio/visual presentation materials must be submitted with agenda item request.
    If yes, type of presentation (PowerPoint, DVD, Internet demonstration, etc.):

11. SELECT ONE:
    INFORMATION: [ ]  ACTION: [ ]
    AGENDA ITEM TEXT: (Insert name of person requesting agenda item:) ____________________ presents for information (OR) requests approval of ____________________

12. Fiscal Impact*: Yes [ ]  No [ ]
    *See Title 4, Chapter 9, Section d, will the proposal increase any fiscal cost or reduce any revenue to the System in excess of $25,000 per year? Explain: ____________________

Revised: September 2011