



Administrative Faculty Committee Nomination Form

Nominee Details

Name: _____

Job Title: _____

College/Division: _____

Department/Unit: _____

Email Address: _____

Phone Number: _____

Brief Biographical Statement

Please include pertinent information about yourself, your role at UNLV, your view of shared governance, and your thoughts on how you would like to serve.

Administrative Faculty Committee Nomination Form

Nominee Support

Provide the names of three (3) UNLV administrative faculty members who support this nomination:

1. _____
Printed Name

Signature

2. _____
Printed Name

Signature

3. _____
Printed Name

Signature

Acknowledgements

I hereby accept the nomination for _____
Name of seat for which this nomination form is being submitted

I have informed my supervisor of my intent to seek this position.

Name of Nominee

Signature of Nominee

Date

To submit this form:

Email a completed and signed Nomination Form to afc@unlv.edu by 5 p.m. on the published deadline date for nominations.