



UWSP Alumni Trailblazer Award Nomination Form

NOMINEE: _____
(include maiden name if applicable)

GRADUATION DATE AT UWSP: _____

Please list supporting information for the following award criteria:

Exceptional achievement in their area of employment within the first ten years beyond graduation:

Exceptional achievement in their area of study within the first ten years beyond graduation:

Exceptional achievement in their area of research within the first ten years beyond graduation:

*Note: Alumni nominated for this award may have graduated no more than 10 years before the date or nomination.

Nominated by: _____

Address: _____

Phone: _____ Email: _____

Relationship to Nominee: _____

Additional supporting information including letters of reference, resumes, published materials, etc. are recommended. Please attach all supporting documentation to the official Nomination Form.

UWSP Alumni Association 2100 Main Street Old Main 208 Stevens Point, WI 54481
715.346.3811 1.877.764.6801 toll free alumni@uwsp.edu www.uwsp.edu/alumni