



Employee Recognition

University Hospital's Employee Recognition Program

Quarterly Award Nomination Form

A description for each of the quarterly awards can be found on UH Net. Selection criteria is provided for each award. Click on the link to the right of the award for more information. Any individual nominated, must have received an overall performance rating of 3 or higher and no disciplinary action in the file. The UH Employee Recognition Committee will be selecting candidates based on the criteria established the month after the quarter ends.

The quarterly awards will be for the calendar year:

Quarter	Dates	Committee Selection/Celebration
First Quarter	January 1 to March 31	April
Second Quarter	April 1 to June 30	July
Third Quarter	July 1 to September 30	October
Fourth Quarter	October 1 to December 31	January

Please complete this form by sharing your comments about the experience you had with the employee(s) that demonstrated the individual or team's outstanding work and commitment to providing excellent patient care and service at University Hospital and the community. Check off which award you would like to nominate the individual or team.

Outstanding Patient Care [Selection criteria](#)

Outstanding Service Excellence and Support [Selection criteria](#)

T.E.A.M. Award (Team/Department) [Selection criteria](#)

Employee(s) You Are Recognizing

Name(s) _____

Title: _____

Department: _____

Supervisor: _____

Your Relationship to the Employee: (Please check) Supervisor or Co-worker

Your Information

Name: _____

Title: _____

Department: _____

Phone Number/email: _____

Description of the Event

1. What did the employee(s) do that demonstrated their commitment to providing outstanding work and excellence in patient care and service to others?

2. How did this action go above and beyond expectations?

3. What impact did it have on you and others around you, University Hospital and/or the Newark Community?

4. When (date) _____ and where _____ did this occur?

5. Anything else you think is important for Committee to know?

Thank you for participating in the UH Employee Recognition Program.

Please send the completed form to Human Resources Department:
Email: Hrlearning@uhnj.org, Fax: (973) 972-2475, Interoffice: ADMC 804/806
For any question call Lorraine Bell at 973-972-6757