



OUTSTANDING PROGRAM AWARD Application Form

PURPOSE: To recognize a program that has shown an outstanding achievement in alignment with the Mission, Vision, and/or Signature Themes of Bemidji State University.

This application should be used by recognized student organizations, faculty/staff, or individuals to nominate a program that they believe is an outstanding achievement.

ELIGIBILITY:

- Program must be sponsored by a recognized student organization
- Event was held within the past academic year

CRITERIA:

- Alignment with the Mission, Vision, and Signature Themes of Bemidji State University
- Inclusiveness of the event
- Future commitment and potential for future achievement
- Projected goals compared to actual results
- Impact on campus life
- Impact on the community

MISSION:

- **Engage** in new worlds of thought, **Embracing** responsible citizenship, **Educating** for the future

VISION:

- Shaping Potentials, Shaping Worlds

SIGNATURE THEMES:

- International/Multicultural Understanding
- Civic Engagement
- Environmental Stewardship

APPLICATION PROCESS AND DEADLINE:

Complete the application form and return it to the Hobson Memorial Union Information Desk, by **4:00 p.m. on Friday, March 25, 2011**. Please print legibly!

RECOGNITION:

Written notification regarding this award will be available by mid-April 2011.

Recipients will be honored with a Certificate of Recognition at the 2011 BSU Leadership Awards Ceremony on April 17, 2011 in the Crying Wolf Room, Hobson Memorial Union.



OUTSTANDING PROGRAM AWARD

Program Name: _____

Annual Event: Y N

Organization Name: _____

Contact Person: _____

BSU Email: _____

Advisor: _____

1. Program/Activity name, date, location, & description: _____

2. What were the goals of this program? Were all of the goals achieved? _____

3. How do you believe this program has encompassed the mission and/ or vision of Bemidji State University? _____



4. Describe the program's impact on campus life and/or the surrounding community? _____

All information provided via the application process must accurately reflect the nominee's actual activities and involvement. Falsification of any information in the application form or letters of recommendation will result in the loss of any award(s) for which the nominee is selected.

I certify that the information provided in this application form and in the accompanying letters of recommendation is true and accurate to the best of my knowledge. I understand that if my nominee is selected for this award, any information provided via the application process will become public and will be announced as part of the award presentation ceremony.

Nominator Signature

Date

Received HMU