The Graduate College
OUTSTANDING GRADUATE FACULTY TEACHING AWARD
2024 - 2025

Nominee ______________________________________________________
Graduate Program____________________________________ Department________________________
Date of Initial Appointment to the UNI Faculty _____________________________
Current Academic Rank_________ Year UNI Tenure Awarded ________________
Office Phone ___________ Department Phone ___________ Campus Mail Code ______

Nominees must be full-time tenured or tenure-track Regular Graduate Faculty members who have been on the UNI faculty for a minimum of three years at the time of nomination. A faculty member may receive the Outstanding Graduate Faculty Teaching Award only once and may not be nominated for any additional University teaching award in the same academic year.

Outstanding teaching will be measured by significant graduate teaching activities, both inside and outside the classroom; evidence of graduate curriculum development activity; solid record of research/scholarship that informs graduate teaching; high standards for graduate student achievement; letters of support from former graduate students and faculty colleagues; student assessments over time; and documentation of outstanding graduate student accomplishments.
One copy of all electronic nomination materials must be received in the Graduate College Office on Friday, January 31, 2025 by 4.30 PM.

Contact the Associate Dean of the Graduate College @ 3-7042 or at gradcollege@uni.edu, if you have any questions.

List the names and addresses of those individuals submitting letters of support.

1. (Nominator)
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________________________________________________________________________

2. ______________________________________________________________________
________________________________________________________________________

3. ______________________________________________________________________
________________________________________________________________________

Signature of Nominee ________________________________ Date ________