

Nominee Information

Name:	Department:
Position:	Supervisor:
CAFE Years of service: 0-3 4-6 7-9	10+ Email:
Phone: Is nom	ninee Faculty or Staff? Faculty Staff
Nomination type: Self Supervisor	Peer
If Self-nomination, have you completed the Unconscious Bias or SuperVision Course? Yes No	
Self-Nomination, please tell us about yourself and why you would like to be a Mentor:	
Supervisor Nomination, please tell us why you feel this person would be a good Mentor:	

Peer Nomination, please explain why you are nominating this person: