TE OF HAN
O and The second second
Contraction and the second sec

STATE OF HAWAII Incentive & Service Awards Program **TEAM OF THE YEAR**

Fiscal Year

NOMINATION FORM		NOMINATION	FORM
-----------------	--	------------	------

NAME OF TEAM:

Team Members (Names/Positions/Divisions/Phone Nos.):				
Department	Island:			
Department:				
Nominator's Name/Title:	Nominator's Phone No.:			
Team Assignment/Objective:				
REASONS FO	R NOMINATION			
(Describe the specific achievement in detail, including: (1) the way and degree to which the team demonstrated exemplary initiative and leadership, outstanding work performance, creativity and innovation in achieving work efficiency or generating revenues or cost savings, and/or significant contribution towards the attainment of program objectives; and (2) benefits or results realized.)				