



**STATE OF HAWAII  
INCENTIVE & SERVICE  
AWARDS PROGRAM**

**NOMINATION FORM**

- Sustained Superior Performance
- Special Act/Service
- Distinguished State Service
- Manager of the Year
- Other

Calendar Year

Name

Position

Position No.

Department

Division

Branch or Office

Nominee's  
Phone

Island

No. of Yrs. with  
State Government

Nominator's Name/Title

Nominator's Phone  
No.

WORK UNIT OBJECTIVES:

GENERAL FUNCTIONS OF THE POSITION:

REASONS FOR NOMINATION: