

**DEPARTMENT EMPLOYEE RECOGNITION AWARD**

**Awardee(s):** \_\_\_\_\_

**Division:** \_\_\_\_\_ **Department:** \_\_\_\_\_

**ELIGIBILITY**

- Individual County Employee
- Extra-help or Contract Staff
- County Volunteers
- Sections, Divisions, Teams
- Interdepartmental Groups/ Efforts
- Whole Department

**CATEGORIES**

- Accomplishment
- Customer Service
- Safety Standards and Practices
- Community Service
  
- Other

**Who or what is being recognized and why?** \_\_\_\_\_

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(If more space is necessary attach additional pages)

**Decision/Selection was made by:**

- Employees or Employee Committee
- Managers/Supervisors
- Both

**Type of Award:**

- Cash
- Recognition/Gift Item
- Lunch/Dinner Out
- Event
- Other

If monetary award:

- Attach standard claim form for reimbursement
- Award should include provision for tax deduction,  
*contact Auditor for further assistance*

**Release to County Reporter**     **Release to Media**     **Forward to Case of Excellence**

Submit Award for approval:

\_\_\_\_\_  
Department Head or Designee Approval Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Human Resources Approval Signature

\_\_\_\_\_  
Title