

**NOMINATION FORM**  
**Wisconsin Idea Seminar**  
**May 21 - 25, 2012**

Department \_\_\_\_\_

School/College \_\_\_\_\_

This Department/Division recommends the following faculty/academic staff member be invited to participate in the Wisconsin Idea Seminar, May 21 – 25, 2012.

Name of Nominee \_\_\_\_\_

Title \_\_\_\_\_

Check one:     Faculty     Academic Staff

Campus Address \_\_\_\_\_

Campus Telephone \_\_\_\_\_

Email Address \_\_\_\_\_

Area of expertise in research, teaching, or administration \_\_\_\_\_

Year of first faculty/academic staff appointment at UW-Madison \_\_\_\_\_

Signature of Department/Division Chair \_\_\_\_\_ Date \_\_\_\_\_

Signature of Nominee \_\_\_\_\_ Date \_\_\_\_\_

***After departmental signatures are obtained, send this form to School/College Dean for approval anytime between September 15, 2011 and February 15, 2012.***

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For Dean's Office only:

***Return this form by March 9, 2012 to Miriam Simmons, Assistant Dean  
Wisconsin Idea Seminar, Graduate School, 333 Bascom Hall***

This School/College is prepared to cover \$600 of the trip cost if this individual is selected.

School/College \_\_\_\_\_

Signature of Dean \_\_\_\_\_ Date \_\_\_\_\_