

The University of Arizona Department of Intercollegiate Athletics

C.A.T.S. Senior Award Dinner
Silver Anniversary C.A.T.S. Award Nomination Form



Silver Anniversary C.A.T.S. Award Nomination Form

Prior to nominating an individual for this special recognition, please be sure that this nominee meets the criteria on the cover letter attached to this form. The nominator should return this form with nominee's resume, biographical information, letter(s) of recommendation and any other pertinent information. Thank you for your time and thoughtful effort.

Date Filed: _____

Award Nominee: _____ **Sport(s):** _____ **Years Played:** _____

Nominee Address: _____

Home phone: _____ **Work phone:** _____

Nominating College/Individual/Organization: _____

Address: _____

Contact Person: _____ **Phone:** _____

Please answer the below questions to the best of your ability:

(Please limit your answers to the space provided below or attach one typed page)

Previous Honor/Awards:

Professional Affiliations:

Community Service:

How has this nominee demonstrated outstanding leadership in his/her community and/or career?

Why does this nominee merit special recognition as a Silver Anniversary C.A.T.S. Award winner?

In what way has this individual give back to The University of Arizona?

How has this nominee applied the mission of the C.A.T.S. Program to their life since he/she was a student-athlete at The University of Arizona?

When you complete the above nomination form, please return to:

Roberta Quiroz
Department of Intercollegiate Athletics
Community Relations Office
McKale Memorial Center – Room N301
1 National Championship Drive
P.O. Box 210096
Tucson, AZ 85721-0096

or Fax your form to: (520) 621-8109