

# 2025-2026 Jack Breslin Distinguished Staff Awards

Nomination Deadline:  
November 10, 2025



MICHIGAN STATE  
UNIVERSITY

# NOMINATION FORM

- Complete the following nomination form. Type or print the nomination form in black ink. Attach additional sheets if necessary.
- Inclusion of **up to three** letters of support will be accepted.
- Supervisor approval is required to assert that the employee is in good standing with a current performance evaluation on file and has not previously received this award.
- Please **do not** notify the nominee of the nomination.
- For assistance or questions regarding the form or process, please contact ***serviceawards@hr.msu.edu***.
- Submit the nomination form and attachments by 5:00 p.m. on November 10, 2025 to ***serviceawards@hr.msu.edu***.

○ Or the documents can be mailed to:  
Jack Breslin Distinguished Staff Awards Selection Committee  
c/o MSU Human Resources  
1407 S. Harrison Road Suite 250  
East Lansing, MI 48823

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## Selection Process Notes

- Individuals may be nominated by any member of the university community (co-worker, supervisor, faculty or student). Nominations by co-workers are encouraged. Supervisor approval is required.
- Nominees must be regular, active employees with at least five years of service in a support staff role at MSU or an approved affiliate of MSU.
- Eligible support staff employee groups are APSA, APA, CT, CCLP, 1585, 999, 324, 274, Nurses and Non-Union. Temporary employees, past recipients and current selection committee members are not eligible.
- Distinctive achievement in each of the four rating categories will constitute the strongest case for selection. The selection committee will be cognizant, however, of particularly outstanding achievement in any one area.

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Nominee's Name: \_\_\_\_\_ Nominee PERNR: \_\_\_\_\_

Nominee's Department: \_\_\_\_\_ Position: \_\_\_\_\_

Nominee's Work Address/Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

Employee Group:    APSA    APA    CT    CCLP    1585    999    324    274    Nurses    Non-Union    Nominee's

Supervisor: \_\_\_\_\_ Phone number: \_\_\_\_\_

Nominator's Name: \_\_\_\_\_

Department: \_\_\_\_\_ Work Address/Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Home Address/Phone: \_\_\_\_\_

Your Employee Group: \_\_\_\_\_

Please describe nominee's job duties:

# NOMINEE'S ACCOMPLISHMENTS

Please describe the nominee's accomplishments in the four rating categories listed below, using specific examples. Use additional pages if necessary.

- 1) Excellence in overall job performance "above and beyond what is expected."
- 2) Outstanding interpersonal skills and working relationships.
- 3) Contributions to the department that lead to efficiency, effectiveness or other improvements.
- 4) Contributions to the university (committees, outreach, projects or other efforts).

Signature of Nominee's Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

*The supervisor signature acknowledges that the nominee meets the eligibility criteria described on this form, is in good standing, has had a recent performance review, and has **not previously been a recipient of this award.***