

Lumen Christi Outstanding Faculty Award

Nomination Form

Name of Nominee *

Email of Nominee (if known)

example@example.com

Phone Number of Nominee (if known)

Please enter a valid phone number.

Address (if known)

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Outline the nominee's contributions to the educational excellence of Loretto Heights College. *

List examples of the nominee's outstanding service to Loretto Heights College students, the LHC community, and the community at large. *

What inspired you to submit your nomination for this individual? *

Submitted by:

Name and Class Year: *

Address

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Email *

example@example.com

Phone Number

Please enter a valid phone number.