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**PRUDENTIAL PRESENTS THE  
2010 DAVIS PRODUCTIVITY AWARDS**

**NOMINATION FORM FOR SUSTAINED EXEMPLARY  
PERFORMANCE BY A WORK UNIT, DISTRICT, INSTITUTION OR  
COMPARABLE ORGANIZATIONAL UNIT**

**DATE PREPARED  
BY NOMINATOR:**

**NOMINATION NUMBER: 2010-**      **or**      **#**  
*(Number assigned by Agency Awards Coordinator)*

**INFORMATION PERTAINING TO YOUR NOMINEE** (Please use upper and lower case, **not all caps**. Provide the name that your nominee would want on his/her award. Do not abbreviate job title or name of state agency. Phonetic spelling is needed to pronounce your nominee's name correctly at an awards ceremony.)

**TEAM OR WORK UNIT**  
Two or more state employees who, as a team or as members of a work unit within a division of a state agency, have won five or more Prudential - Davis Productivity Awards, or who have received other recognition, over a period of five or more years, and/or who, as a team or members of a work unit within a state agency, have provided exemplary state services for 20 or more years.

**PARTNERSHIP**  
Two or more state employees from different divisions within a state agency, or from two or more state agencies, who have won five or more Prudential - Davis Productivity Awards, or received other recognition, over a period of five or more years.

**NAME OF TEAM, WORK UNIT OR PARTNERSHIP**  
*Maximum of six (6) words – Do not use acronyms*

**NAME OF AGENCY/AGENCIES:**  
**TOTAL NUMBER OF NOMINEES:**

**NOMINATOR'S INFORMATION**

Name of Nominator:	Title:
Agency:	Address:
City:	State:                      Zip:                      -
Telephone Number: (    )                      -                      Ext.	FAX: (    )                      -
Email:	

## NOMINEES

For nominations involving employees located in multiple cities, please indicate the location where you prefer an award be presented, if applicable. (Choose only one location.)

Please provide the following information on up to four (4) state employee nominees who will be designated to receive award checks (if applicable) on behalf of all members and represent their team, work unit, or partnership at an awards ceremony. If your nomination includes more than four (4) state employee nominees or non-state employees, please complete the "ADDITIONAL NOMINEES" section at the end of this nomination form. If you would like less than four (4) checks cut for your team (regardless of the number of team members), please only enter the information for the person(s) to receive the checks below, and enter the additional nominees at the end of this form.

<b>1. Name:</b>	Title:
Agency:	Division:
Bureau:	Address:
City:	State: Zip: -
Telephone Number: ( ) - Ext.	FAX: ( ) -
Email:	
<b>2. Name:</b>	Title:
Agency:	Division:
Bureau:	Address:
City:	State: Zip: -
Telephone Number: ( ) - Ext.	FAX: ( ) -
Email:	
<b>3. Name:</b>	Title:
Agency:	Division:
Bureau:	Address:
City:	State: Zip: -
Telephone Number: ( ) - Ext.	FAX: ( ) -
Email:	
<b>4. Name:</b>	Title:
Agency:	Division:
Bureau:	Address:
City:	State: Zip: -
Telephone Number: ( ) - Ext.	FAX: ( ) -
Email:	

## NOMINATION CATEGORY

This nomination is for a team, section, bureau, office, division, district, region, institution or comparable organizational unit within a state agency that has received one or more Prudential - Davis Productivity Awards, or has received other recognition, in each of five or more of the past ten years.

### WRITTEN SUMMARY

**Sample:** This team has won ten Prudential-Davis Productivity Awards over the past five years for implementing traffic engineering improvements to reduce crashes, injuries, and fatalities in the Tampa Bay area. The awards include reducing red-light running crashes with enforcement lights developing a traffic safety data CD; developing "Reduced Crashes with Enforcement Lights -- A Success Story;" implementing a crash data management system for saving state dollars; developing a hurricane action plan; developing a program to install "qwik kurb"; expanding implementation of the crash data management system; and developing a mobile lighting measurement system.

**Please draft your response as formatted above. Do not use program or agency acronyms or abbreviations without explanation. In order to demonstrate sustained exemplary performance, please include your nominee's major achievements, including numerical performance data where available. Any additional information you wish to provide should be provided in the "Optional Information" section.**

(150 words)

### SPEAKING SUMMARY

**Sample:** This team has won ten Prudential-Davis Productivity Awards over the past five years for implementing traffic engineering improvements to reduce, crashes, injuries, and fatalities in the Tampa Bay area. The team's efforts have saved countless lives and millions of dollars.

**Please provide your response as formatted above. The speaking summary should be a condensed version of your written summary, and it should include numerical performance data.**

(50 words)

### OPTIONAL INFORMATION

Please provide any additional data, information or explanation that you think will assist evaluators and the Panel of Judges in understanding and appreciating your nominees' worthiness for sustained exemplary performance recognition.

(200 words)

### NOMINATOR'S ENDORSEMENT

I, \_\_\_\_\_, hereby recommend the above nominees for a 2010 Prudential - Davis Productivity Award.

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**Signature of Nominator**

**MANAGER'S COMMENT**

A bureau chief or higher-level manager **(NOT THE NOMINATOR)** who can verify the nominees' achievement is required to supply the following:

The nominees' achievement deserves an award for the following reason(s):

**Sample:** These nominees from our District 7 Traffic Operations Safety Office are very deserving of this Sustained Exemplary Performance Award due to their exceptional and outstanding efforts to reduce crashes, injuries, and fatalities on roadways in the Tampa area.

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**Signature of Bureau Chief or Higher Level Manager (Other than Nominator)**

Print Name:

Title:

Telephone Number: (    )

Ext.

Suncom:

Email:

**AGENCY AWARDS COORDINATOR REVIEW**

I have reviewed this nomination for completeness and for compliance with the nomination guidelines.

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**Signature of Agency Awards Coordinator**

Print Name:

**ENDORSEMENT AND SIGNATURE OF AGENCY HEAD OR DESIGNEE**

The responses to the questions on this nomination form have been represented to me by the nominator and/or awards coordinator as accurate and complete.

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**Signature of Agency Head or Designee**

Print Name:

## **ADDITIONAL NOMINEES**

**Please list all nominees not appearing on pages one and two (2) of the nomination form. STATE employees should be listed first, followed by any NON-STATE employees.**