



THE OHIO STATE UNIVERSITY

COLLEGE OF FOOD, AGRICULTURAL,
AND ENVIRONMENTAL SCIENCES

DUE- January 30, 2015, 5:00 p.m.

APPLICATION FORM OUTSTANDING UNDERGRADUATE ACADEMIC MENTOR

AWARD DESCRIPTION: The CFAES Council is sponsoring an award for excellence in academic undergraduate mentoring by faculty and/or staff members within the College of Food, Agricultural, and Environmental Sciences and School of Environment and Natural Resources.

NOMINATION AND SELECTION PROCESS: To nominate your mentor, complete the lower portion of this page and e-mail it to Dr. Marilyn Trefz at trefz.2@osu.edu by **January 30, 2015 at 5:00 p.m.** Questionnaires will be sent to a random sample of advisees of all nominees, and the recipient will be chosen by a selection committee made up of CFAES Student Council Members.

PAST AWARD RECIPIENTS: Please note that **this is a non-repeating award. If your advisor/mentor has received the award in the past, he/she is no longer eligible.** Past recipients of this award are: **Dr. Henry Zerby (2014), Dr. Kimberly Cole (2013), Dr. Susie Whittington (2012), Ms. Mariette Benage (2011), Dr. Emily Rhoades (2010), Dr. Ana Hill (2009), Ms. Laura Burchfield (2008), Dr. Joseph Ottobre (2007), Dr. Matthew Roberts (2005), Dr. Mark Tucker (2004), Dr. Bernie Erven (2003), Dr. Virginie Bouchard (2002), Dr. Pete Spike (2001), Dr. Carl Zulauf (2000), Dr. Michael Lichtensteiger (1999), Dr. Kent Harrison (1998), Dr. Keith Irvin (1997), Dr. R. Kirby Barrick (1996), Dr. David Hix (1995), Dr. Robert L. Vertrees (1994), and Dr. Michael Mangino (1993).**

The selected mentor will be awarded \$500 and a plaque at the 2015 Recognition Program on April 16, 2015. A permanent wall plaque is displayed in Ag Administration Room 100 to further recognize outstanding academic mentoring.

Name of Nominated Advisor/Mentor: _____

Position Title: _____

Academic Unit: _____

Name of Nominating Student: _____

Student's Phone: _____ **Email:** _____

**NOMINATIONS ARE DUE
FRIDAY, JANUARY 30, 2015 BY 5:00 P.M.
to trefz.2@osu.edu.**

QUESTIONS? Contact Dr. Marilyn Trefz at 614-915-1150 or trefz.2@osu.edu.

APPROVAL FOR RELEASE OF INFORMATION:

By submitting this completed applications form, I authorize the release of the information on this form to the Selection Committee. I also affirm all information provided in this form is an accurate assessment of my participation and level of responsibility in the activities.

REQUIRED

Click check-box to agree

Date: _____

Print a copy of your completed application form, for your records, prior to submission

IMPORTANT: 1.) **Save this application form to your computer** before starting to complete. 2.) After saving the document on your computer, open that copy of the document file. 3.) Complete the form. **You MUST use Adobe Reader when completing this form** (Apple users: DO NOT use "Preview" for completing this form for submission). Remember to save a copy of your completed form for your records. 4.) Attach a copy of your completed and saved application form to an email to trefz.2@osu.edu.

Why do you feel your academic advisor/mentor is deserving of this award? *(maximum response limit is 2,500 characters)*