



NOMINATION FORM

Date: _____ Your Name: _____

Your phone number: _____ Your email: _____

Name of Nominee: _____ School: _____

Nominee's position at school: _____

What is your relationship to the person being nominated (are you a co-worker, parent of student, supervisor, student)?

Number of years nominee has been employed in a Catholic school system (nominee must have worked in a Catholic school system at least the last 3 years to qualify):

The Work of Heart award honors full-time Catholic school employees who exceed their job duties.

In your answers below, please describe how your nominee demonstrates all three Work of Heart criteria:

- 1. Displays outstanding service to your school**
- 2. Models Christian values**
- 3. Goes above & beyond to support students, families and/or our Dallas-area community**

Please provide 2 to 4 detailed examples of how you have witnessed this person **exceeding** all expectations to positively impact students, families, co-workers and/or visitors in your school community.

Please explain **how** this person consistently demonstrates Christian values to positively impact students, families, co-workers and/or visitors in your school community?

Please provide any additional anecdotes and/or examples of what makes this employee such an integral part of your Catholic school community.

UPLOAD ANY PHOTOS OR VIDEO HERE

Please initial your understanding of the following statements:

I understand that this nomination will be anonymous, but my name and relationship to the Nominee must be provided to The Catholic Foundation.

I give my approval to share this nomination on other external communication vehicles.

After downloading the fillable Work of Heart nomination form, scan and send your completed application to workofheart@catholicfoundation.com, or call 972-661-9792 with any questions.