



NEVADA SYSTEM OF
HIGHER EDUCATION

**NOMINATION FORM
SAM LIEBERMAN REGENTS' AWARD FOR
STUDENT SCHOLARSHIP**

This form must be accompanied by a letter of nomination, a one-half page biography of the nominee, and any supplementary materials as determined by the institution.

NSHE INSTITUTION _____ **ACADEMIC YEAR: 2024-25**

FULL NAME OF NOMINEE _____

NICKNAME (IF NOMINEE GOES BY ANOTHER NAME) _____

PHONETIC SPELLING OF NAME _____

MAILING ADDRESS _____

Street Address

City / State / Zip Code

EMAIL ADDRESS: _____

HOME OR CELL PHONE NUMBER _____ *(IF APPLICABLE)*

MUST ATTACH:

- 1. A formal letter of nomination from an academic or administrative faculty member that adheres to the award guidelines and demonstrates the nominee's academic and leadership abilities; AND**
- 2. A half-page biography of the nominee on your campus letterhead**