



Retiree Citation Request Form

Please provide as much personal information as possible on this form. Return the completed form to the Human Resources Office **45 days prior** to presenting the award to employee.

Recipient Name as it will appear on citation: _____

Date citation to be awarded: _____

Education:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Employment (agency/company, department, job titles, dates, full-time/part-time):

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

Community Involvement:

Department requesting citation: _____

Person submitting the request: _____

Office phone number: _____