**Piper Professor Nomination**

Name of College/University/Institute

Address of Institution Zip

Name of Piper Professor Nominee Highest Degree Held (Abbreviated Form)

Rank/Title of Nominee and Department

Years of Teaching at College Level At Present Institution

Current Teaching Load: Lecture Hours/Week Lab Hours Other *

Approximate No. Students: Undergraduate Graduate Other *

Standard Full-Time Teaching Load at your Institution: Undergraduate Graduate

Summer Teaching: ____________________________

* Other = Conference courses; Theses/Dissertations Directed; Misc. (Describe in next section)

Please describe current additional or administrative duties, i.e., Chairman of Department, Graduate Advisor, Thesis/Dissertation Director, etc., giving numbers of Professors/Students involved and approximate number of hours devoted thereto.
Student Organizations or Scholastic Fraternities Sponsored: (during past three years).

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Membership in Honor Societies; Professional Societies; Listing in Who's Who or Other; Special Educational Projects Undertaken (TV series, etc.), Special Awards/Grants Received:

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Service to off-campus community: (committee work, church work, fund drives, Scouts, etc.)

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- 2 a -
Since the Piper Foundation is primarily interested in identifying and honoring effective and dedicated teachers, the Selection Committee would appreciate any information you care to submit about the nominee's teaching. Is there evidence that the nominee is particularly effective in the classroom and in personal contact with students? Has the nominee demonstrated an unusual dedication to the profession of teaching? Does the nominee inspire respect and admiration in his colleagues? In comparison with other members of the faculty, how do you rate the nominee (1) as a teacher, (2) as a scholar, and (3) in the contribution made to the achievement of the purposes of the institution?

How was your nominee selected? Please be specific and indicate if he/she has been nominated before.

Fall Semester Full-time Equivalent Student Body Enrollment of your Institution: __________________________

Date __________________________

Signature of Administrator __________________________

Rank/Title/Administrative Position __________________________
2012

PIPER PROFESSOR NOMINATION

PERSONAL INFORMATION

Name ( ) Dr. ( ) Mr. ( ) Mrs. ( ) Miss ___________________________ ___________________________ ___________________________

First Middle Last

Home Address ___________________________ ___________________________ ___________________________ ___________________________

Number and Street City Zip Telephone

College/University

Address ___________________________ ___________________________

Name of Institution

Rank/Title

and Department ___________________________ ___________________________ ___________________________ ___________________________

Building and Office Telephone and Extension

Date of Birth ___________; Place of Birth ___________________________; Soc.Sec.# ___________________________

Marital Status: ___________; Number of Children ___________; Ages ___________________________

Military Service Record: Branch ___________; Dates ___________________________; Rank ___________________________

EDUCATIONAL EXPERIENCE: Schools and Colleges Attended, beginning with High School

Name of Institution ___________________________ ___________________________ ___________________________ ___________________________

Dates of Attendance ___________________________ ___________________________ ___________________________ ___________________________

Degree/Diploma Received ___________________________ ___________________________ ___________________________ ___________________________

PLEASE NOTE
Part "B" - To be completed by Nominee

- I B -
Additional Training (Summer Institutes, Seminars, etc.)

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TEACHING EXPERIENCE:

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PUBLICATIONS: Although the Selection Committee is not primarily concerned with "Research/Publish or Perish," please summarize any research projects completed, and list any books/articles published and/or in use, exclusive of your Master's Thesis and/or Doctoral Dissertation. (Continue on reverse side if necessary)
STATEMENT OF PURPOSE: Why are you teaching?

CURRICULUM VITAE: Other than what has heretofore been enumerated, please indicate the highlights of your teaching career.
AUTOBIOGRAPHICAL SKETCH: Short personal history.

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Date  ___________________________  Signature of Nominee  ___________________________