Mathematical Association of America
Awards for
Distinguished College or University Teaching of Mathematics
Nomination Form

PLEASE TYPE
Nominee's Name (First name first): ________________________________________________

College or University Affiliation: _____________________________________________

College or University Address: ________________________________________________

City: ___________________________ State: ___________ Zip: __________

Nominee's email address: ____________________________

Is the nominee a current member of the Mathematical Association of America? ________

Nominee's number of years teaching experience in a mathematical science: ____________

Has the nominee taught at least half time in a mathematical science during the current academic
year or during the previous year if on approved leave or sabbatical? _________________

In the space below, please briefly describe the unusual personal and professional qualities of the
nominee that contribute to his or her extraordinary teaching success.

Name of nominator (First name first): _____________________________________________

Address: ____________________________

Telephone: __________________ Email: __________________

Signature: ___________________________ Date __________________