

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

Nomination Form

Please type.

Name of Nominee (last name first): _____

Name of College or University: _____

College or University Address: _____

Number of years of 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 of Nominator: _____

Telephone: _____ Email: _____

Nominator's Signature: _____