

## Staff Appreciation and Recognition (STAR) Individual Achievement Award Nomination Form

Achievement Awards are designed to recognize sustained, exceptional performance and/or significant contributions from an employee over an extended period of time (typically at least six months).

To be eligible for an Achievement award, the employee must:

- be in a staff policy covered or CX position
- hold a career position or a contract position at 50% time or more for a duration of six months or more (where eligibility is incorporated into the terms of the contract); or a limited position and have at least six months of continuous service
- have completed probationary period where applicable
- obtained a satisfactory performance rating. Nominated employees who have not yet received an annual performance evaluation (PE) may be eligible for an award if the employee's performance is trending satisfactory or above
- be on active pay status or approved unpaid leave at UCSF on the date that the cash payment is made (please advise your HR Representative if a leave is anticipated)
- not participate in the clinical incentive program (CERMP2) or another type of incentive award program
- may not have an award exceeding 10% of base salary or \$10,000
- may not receive multiple awards that exceed \$5,000 without HR approval
- must reflect at least one of the Chancellor's Goals and/or Pride Values

The department should ensure the nominee meets eligibility requirements prior to submitting the nomination.

Nominee information						
Nominator:		Date of nomination:	□ Yes □ No			
Nominator's Department:	de					
Nominee Name	Nominee's Dept	Nominee Job Code	Nominee Payroll Title			
Achievement Awards must reflect at least one of the Chancellor's Goals and/or Pride Values						

Which of the chancellor's goals is this achievement linked to?			
□ Foster Innovation	□ Bolster financial resiliency		
□ Build value-added partnerships	□ Nurture UCSF's culture and empower its people		

What pride values does the nominee exemplify?				
□ Professionalism	□ Integrity	Excellence		
□ Respect	□ Diversity			
Provide a detailed description of the achievement/contribution that supports your nomination.				

What is the impact of this achievement/contribution?

Approvals

Supervisor Name:

Supervisor has reviewed eligibility and supports this nomination:  $\Box$ 

**Control Point/Department STAR Award Approval** please obtain approval per your unit's local process. Please note: the home department of the award recipient will need to approve and fund the award regardless of who nominates the employee If this award is for an employee outside of your department; please coordinate with the home department.

Approver	Approver	Date:
Name:	Signature:	

Comments:

Once approved, please complete funding information below and attach this nomination to a <u>Additional Pay</u> <u>Management Action Form</u> to process the award.

Employee Record and Funding Information					
Pay Frequency	UCPath EID	UCPath Employee Record #	Position number	Award Amount	
Fund Code	Dept ID	Project	Function	Flexfield	
5000			72		