ASSISTANT SECRETARY OF THE NAVY
(RESEARCH, DEVELOPMENT & ACQUISITION)
ACQUISITION EXCELLENCE AWARDS PROGRAM
NOMINATION FORM

AWARD CATEGORY

☐ Individual ☐ Civilian Or ☐ Military
☐ Team
☐ Organization Category

INDIVIDUAL OR COMMAND BEING NOMINATED

NAME:_____
(If individual award) Rank/Grade First MI Last

POSITION TITLE:_____

COMMAND:_____
(If Team or Organization Award)

COMMAND LEVEL: ☐Echelon II Command or Above
☐Echelon III Command or Below

OFFICE ADDRESS:_____

TELEPHONE:_____
DSN Commercial Number

NOMINATOR DATA (SPONSOR)

NAME:_____
Rank/Grade First MI Last

_____
Signature Date

POSITION TITLE:_____

OFFICE ADDRESS:_____

TELEPHONE:_____
DSN Commercial Number
Email:_____

HEAD OF CONTRACTING ACTIVITY:_____

JUSTIFICATION

CATEGORY: _____

ACCOMPLISHMENT: Cite specific examples (see grading criteria to ensure each graded area is addressed). Use Courier New font and 10 point pitch.

CATEGORY: _____

SIGNIFICANCE: Cite mission impact of accomplishments (see grading criteria to ensure each graded area is addressed). Use Courier New font and 10 point pitch.

CATEGORY: _____

TEAM MEMBERS: Include name and rank/grade of each team member. No more than 10 members without HCA justification. Place an asterisk (*) by name of team leader.

AWARD ABSTRACT: Provide highlights of achievements to be used for ceremony script and display posters if selected. Do not exceed 500 words