Nomination Form

2016 PARANGAL SA PROGRAMANG PANG-EKSTENSIYON

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Extension Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Unit : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Present Rank of Program Head:

Vision/Mission of Unit:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 Endorsed by:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Dept Chair/Director

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Dean / Head of Unit

**THIS SECTION TO BE FILLED OUT BY THE NOMINATING PERSON**

Write a brief description of the notable achievements of the extension program. This is VERY IMPORTANT as a measure of the nominating person’s and/or unit’s esteem and regard for the nominated program.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Printed name & Signature of Nominating Person**

**SUMMARY OF EXTENSION PROGRAM\***

(Please cite the most significant extension activities within the last three years. )

1. **Title of Extension Program:**

2. **Duration:**

3. **Program Description (Background, Rationale, Objectives, Activities; please also indicate source of funding):**

4. **Organization(s) / Community(ies) / University (ies) Served**

5. **Effect/impact of extension work on the organization / community served:** Please provide proper documentation e.g. final report, endorsements, photos, awards received by the program. The report may contain the following: extent that project objectives have been achieved; institutionalization of the project (e.g. organizing work achieved, project replication, ordinances instituted); and empowering and transformative processes introduced by the project.

6.  **Introduction of innovative /creative approaches**

7. **Extent that the project was able to include other individuals or groups as partners:**

a. within the university

|  |  |  |
| --- | --- | --- |
| Name | Office / Position (Pls. indicate tel nos. & e-mail address) | Role / Participation in the extension project  |
|  |  |  |
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b. outside the university

|  |  |  |
| --- | --- | --- |
| Name | Office / Position (Pls. indicate tel nos. & e-mail address) | Role / Participation in the extension project  |
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8. **Enhancement / enrichment of teaching and/or research knowledge & skills** (Pls. indicate relevant material(s) related to extension work (e.g. teaching or training modules, educational videos, etc. or published research(es) or manuscripts accepted for publication.)

\*Please use form as guide; may add relevant information as deemed necessary.