UNIVERSITY OF MARY WASHINGTON

Employee Recognition Policy for
Certifications, Licenses and Degrees

Recognition Award Notice

Supervisors must submit completed original form with all required signatures and documentation to Human Resources by January 30 or July 30 of each calendar year. Bonuses will be processed within 30 calendar days of approval.

Name of Recipient: _____

☐ Administrative Faculty ☐ Classified ☐ Wage Pay Band _____

Department: _____

Last 4 digits of SSN or ID#: _____

Immediate Supervisor: _____

☐ License ☐ Certification ☐ Degree

Date Earned: _____

Please describe the certification, license or degree and issuing authority, college or university

_____
_____
_____
_____

Attach required documentation:
☐ Degree – Transcripts
☐ Certification – Copy of Certificate
☐ License – Copy of the License

Award Notice verified as indicated by Signatures:

_____ _____
Recipient Date

_____ _____
Supervisor Date

_____ _____
President, Cabinet VP (Designee) Date

HR USE ONLY

Approved? _____ **Payout date** _____ **Monetary Amount:** _____ **Initials:** _____