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# DONALD LOVE SERVICE AWARD APPLICATION

The information requested will be used to determine selection for the Department of Pathology’s Donald Love Service Award. Please submit your application by the 25th of each month for consideration.

The program will provide financial support in the form of reimbursement to Pathology staff members enrolled in either certificate or degree programs, to assist with incidental costs associated with pursuit of these programs. Proof of enrollment will be required prior to distribution of funds.

The application period will begin on Feb. 1, 2022, and will remain open over the next several months, contingent on availability of funds, to allow staff ample opportunity to research options and apply to programs of interest and have appropriate documentation of enrollment.

The completed package consists of the following:

* Application (complete sections I-III)
* Copy of most recent performance evaluation (2021)
* Recommendation from either of the following: current manager/supervisor, a peer or a mentor

**SECTION I – PERSONAL DATA**

| Name: | Click or tap here to enter text. |
| --- | --- |
| Duke Unique ID: | Click or tap here to enter text. |
| Continuous Service Date: | Click or tap here to enter text. |
| Employment Status: | Exempt or Nonexempt |
| Telephone: | Click or tap here to enter text. |
| E-mail Address: | Click or tap here to enter text. |

## SECTION II – EMPLOYMENT HISTORY AND EDUCATION

Please provide a resume outlining your complete work history and education.

## SECTION III – ADDITIONAL INFORMATION

(Attach additional sheets if necessary)

1. Please draft a paragraph outlining your career goals - what you are pursuing and the expected final outcome.

Click or tap here to enter text.

1. Please draft a paragraph detailing how funds from the Donald Love Service Award will help you achieve these goals.

Click or tap here to enter text.

1. Please provide information related to your program of choice that details specifics about the program (include links or printed information about your program, to include name of course/institution, dates offered and program description).

Click or tap here to enter text.

1. If you have participated in other educational programs, (i.e., financial services, safety training, technology training etc.); received certifications, (i.e., RAA, CPS, CFM, EMT, etc.); received academic honors, (i.e., honor roll, honor society, etc.); or have been recognized for any special work or outstanding performance, (i.e., employee of the month, Duke University Presidential Award, volunteer work, etc.), please describe.

Click or tap here to enter text.

1. Are you willing to sign an agreement to continue to work at Duke for one year after receiving funding in return for the financial support provided by Duke for education and training? [ ]  Yes [ ]  No

I certify that the above responses are true to the best of my knowledge, and am aware that falsification of information on this application may result in denial of admission or dismissal after admission to the program.

| Signature:  | Click or tap here to enter text. |
| --- | --- |
| Date: | Click or tap here to enter text. |