



UNIVERSITY OF GEORGIA

Academic Advising Services

2025-2026 OUTSTANDING UNDERGRADUATE ACADEMIC

ADVISOR AWARDS NOMINATION FORM COVER SHEET

☐ Professional Advisor (Award)

☐ Advising Administrator (NACADA nominee)

☐ New Advisor (Award)

☐ Excellence in Advising Special Populations (Award)
(Special Population: _____)

Name of Nominee

Title of Nominee

School/College/Unit

Campus Mailing Address

Phone Number

UGA Email Address

Years as an advisor/administrator (as appropriate to category)? ____

For Professional Advisor, New Advisor, and Special Populations categories only:

Average number of students advised per term ____

Academic advising is the primary responsibility? ☐ Yes ☐ No

Percentage of time spent on academic advising? ____

For Advising Administrator category only:

How many advisors supervised (directly or indirectly)? ____

NOTE: Your nominee will have the opportunity to elaborate on other duties on their resume/CV

School/College/Unit

Signature of Dean or Director

For Internal Use Only

Date Received