FOR OFFICE USE											
State USAID	Date Received by Awards Office (mr	n-dd-yyyy)	Date Related to Personnel	Records (mm-dd-yyyy)							
& (M) &	U.S. Department of State	9									
NOMINATION FOR AWARD											
PART I - NOMINATION											
Name of Nominee (Last, First, Ml.)	TART - NOMINATION		urity Number ORG Symb	ol or Post							
Present Position Title and Grade	Position held of	Position held during period covered by nomination if different than present									
Position field during period covered by nomination if different than present											
REASON FOR AWARD											
Performance Customer S	ervice Teamwork										
Special Act Innovation	Crisis Management		Other								
	TYPE OF AWARD RECOMME	ENDED									
The Secretary's Award	Superior Honor Award		—								
Award for Heroism	Meritorious Honor Award		Time Off From Du	ity Award							
Secretary's Career Achievement Award	Franklin Award		Cash								
Distinguished Honor Award	Foreign Affairs Award for I	Public Service	Other	_							
Recommended Amount (Cash/Time Off Hours	Арр	roved Amo	ount Ap	proved Award							
	_										
Justification for Award (Include a concise cital	tion to be used on the award certificate.	Additional s	sheets may be used.)								
Nominated By (Name, Title, Signature)				Date (mm-dd-yyyy)							
Approved By (Supervisor's Name, Title, Signatu	re) Applicable only if nominated by other tha	n supervisor		Date (mm-dd-yyyy)							

NOMINATION FOR AWARD

Justification for Award Continuation Sheet (Include a concise citation to be used on the award certificate.)							
	ļ						

DS-0066 Page 2 of 3

PART II - ACTION TAKEN/TIME OFF FROM DUTY AWARD - Optional - For period not to exceed one work day.									
Bureau/Post Approval	(Name, Title)			Date	(mm-dd-yyyy)				
Bureau/Post Approval	(Signature)								
PART III - ACTION TAKEN BY JOINT COUNTRY AWARDS COMMITTEE									
Approve Da	te (mm-dd-yyyy)	Remarks	S						
Disapprove Cash Awards Only - A	anner and American								
Cash Awards Only - A	oproved Amount								
Typed Name of Comm	ittee Chairnerson								
Typed Hame of Comm	ntioo onumpercen								
Signature of Committe	e Chairperson								
		PART IV - ACTION TAKE	EN BY CHIEF OF MISSION	l .					
Da Da	te (mm-dd-yyyy)	Remark	<u> </u>						
THE Applove	, , , , , , , , , , , , , , , , , , , ,								
Disapprove									
Cash Awards Only - Ap	proved Amount								
Typed Name of Chief of	of Mission								
Typed Name of Officer	n iviission								
Signature of Chief of M	lission	<u>'</u>							
	DAD	T V - A CTION TAKEN BY	AREA AWARDS COMMI	TTCC					
	te (mm-dd-yyyy)	Remarks		1122					
Approve	(e (mm dd yyyy)	Kemark	•						
Disapprove									
Cash Awards Only - Ap	proved Amount								
Typed Name of Comm	ittee Chairperson								
0: 1 (0 ::	01								
Signature of Committe	e Chairperson								
		ACTION TAKEN BY DE	PARTMENT AWARDS CO	OMMITTEE					
Approve Dat	e (mm-dd-yyyy)	Remark	S						
Disapprove									
Cash Awards Only - A	pproved Amount								
Typed Name and Title									
Signature									
		PART VII - I	FISCAL DATA						
Bureau/Post Budget C	fficer (Name, Signature)				Date (mm-dd-yyyy)			
Accounting Classific	ation (Completed by Burea	au/Post Budget Officer)			For Gift Cheq	ue Use Only			
Agency Appropriat	on Allotment Obliga	tion No. Org. Code	Function Object	Award Amount	Obligation	Net			
PART VIII - PAYROLL OFFICE INFORMATION - FOR GIFT CHEQUE USE ONLY									
Bureau/Post Awards O	fficer (Name, Signature)	TROLL OFFICE INFORM	MATION - FOR GIFT CHEC	OE USE UNLY	Date (mm-dd-yyyy)			
Daleau/F OSt Awalus O	moer (rvarne, Signature)				Date	r-uu-yyyy)			
Payroll Information (0					1				
Gross Amount	Federal Tax Withheld	State Tax Withheld	OASDI Tax Withheld	FHI Tax Withheld	Net Am	ount			
l									

DS-0066 Page 3 of 3