

Algernon Sydney Sullivan Award

Nomination Form 2025-2026

Nominated Stu	dent Informat	on:	
Full Name:		<u>-</u>	
	Last	First	Middle
AU I.D. Number:			
Email Address:			
Local Address:			
	City	State	 Zip
Permanent Addre	ess:		
-	City	State	Zip
Curriculum/Majo	r:		
College/School:			
Classification:			
	Junior	Senior	Graduate Student
GPA:			
Auburn Univer	sity Faculty or	Staff Member Submitting N	Iomination:
Name:			
Las	st	First	Middle
Title & Departme	nt:		
Email Address:			
Date:			

Note: Nominators may attach a student's resume to the nomination form, however, the above information requested above must be complete on the nomination form.

Deadline for nominations: Friday, January 30th at noon

E-mail forms to Lady Cox at lady@auburn.edu