CIVILIAN EMPLOYEE OF THE QUARTER OR YEAR NOMINATION			
NAVSUPPACT NAPLES FORM 12451/2 (R	ev 4-15)		
\square 1 st Quarter (Jan - Mar) \square 2 nd Quarter (Apr – Jun) \square 3 rd Quarter (Jul – Sep) \square 4 th Quarter (Oct - Dec)			
Year (Jan – Dec)			
CATEGORY I GS-1/UA-9/UC-8/NF-1 through GS-5/UA-5/UC-5/NF-2	CATEGORY II GS-6/UA-4/NF-3 through GS-10/UA-2/NF-4		CATEGORY III GS-11/UA-1/NF-5 through GS-14/QX
1. NAME OF EMPLOYEE (LAST Name, First Name, MI)			
2. POSITION TITLE/PAY PLAN-SERIES-GRADE (i.e., Secretary/GS-318-05)			
3. ORGANIZATION LOCATION (i.e., NAVSUPPACT Naples Code N1)			
4. BRIEF DESCRIPTION OF JOB DUTIES			
5. BRIEF DESCRIPTION OF PERFORMANCE UPON WHICH AWARD RECOMMENDATION IS BASED			
NOMINATING SUPERVISOR		DEPARTMENT HEAD	OR SPECIAL ASSISTANT
(Typewritten Name and Title))	(Typewrit	ten Name and Title)
		VI.	,
(Signature)		(Signature)