

**CITY OF MILFORD
EMPLOYEE OF THE MONTH NOMINATION FORM**

Name of Nominee _____

Title _____

Department _____

Telephone Number _____

Your Name _____

Your Telephone Number _____

Please explain the reason(s) for your nomination (attach additional sheets as necessary).

Please forward, email (tbarnes@ci.milford.ct.us or lpisacane@ci.milford.ct.us) or fax (783-3228) this form to: Tania Barnes, Human Resources Director, Parson's Government Center. Questions may be directed to same at 783-3239.