

## Oklahoma Department of Corrections ARROW Award Nomination Form

\*\*\*PLEASE USE A SEPARATE FORM FOR EACH NOMINATION\*\*\*

Nominee: \_\_\_\_\_ Date: \_\_\_\_\_

Job Title/Position: \_\_\_\_\_ Facility/Unit: \_\_\_\_\_

Would you like the  
nominee to know you  
nominated them?

☐ Yes ☐ No

Describe/explain ARROW Award:

The ARROW Award recognizes an ODOC employee's work that is **Admirable, Reliable, Resourceful, Outstanding,** and **Worthy** of this commendation at any time.

Recipients will have demonstrated outstanding service or performance exceeding established standards.

Provide a detailed summary of why the nominee should be recognized for this award:

\_\_\_\_\_  
Printed Name of Nominator

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Facility/Unit

\_\_\_\_\_  
Date

I have confirmed the nominee meets the award and eligibility criteria specified in OP-110221 entitled "Agency Recognition Program" for the ARROW award.

\_\_\_\_\_  
Nominee's Supervisor

\_\_\_\_\_  
Date

Email this form to: [communications@doc.ok.gov](mailto:communications@doc.ok.gov)