WINONA STATE UNIVERSITY EMERITUS STATUS – NOMINATION FORM

The Department (Office) of		recommends that		
(Name of Retiree)	be designated	ofessor for IFO, I	Position for ASF)	Emeritus
in accordance with WSU Regulation 5-1 and MnSCU Policy 4.8 and the following citations:				
WHEREAS	serve iree)	d Winona State	University from	
(Name of Ret	iree)			
	_ to	, a	Ind	
WHEREAS,				
WHEREAS,				
WHEREAS,				
WHEREAS,				
WHEREAS,				
(additional citations may be indicated on a separate sheet)				
THEREFORE, by the authority vested in me by the Minnesota State College and University Board				
-	Is hereby designated		J.	-
(Name of Retiree)		(Professor for	IFO, Position Title	for ASF)
Emeritus at Winona State Un	iversity on this		Day of May, Two	Thousand
and	·			
		President		
Recommendation submitted	ру	Fo	or the Department (or area) of