



LESTER A. KIRKENDALL OUTSTANDING MENTOR AWARD NOMINATION

Nomination Deadline — June 1, 2020

E-mail this Nomination Form & letters (PDF) to thesociety@sexscience.org

What is the Lester A. Kirkendall Outstanding Mentor Award?

This award is designed to highlight individuals who, in the tradition of Dr. Kirkendall, are outstanding mentors. One individual per year will be recognized as the recipient for providing exceptional mentorship to students.

Mentor Eligibility

- Nominee must have served in a mentorship role, providing guidance to students and developing professionals in the field of sexuality.
- Mentor relationship must exceed 1+ year(s), and may include a current or past mentorship.
- The nominee does not need to be a SSSS Member.

Mentee (Nominator) Eligibility

- Nominator must be a current SSSS Student Member.
- Nominator must have received direct mentorship from the nominee, past or current.
- Each nominator can only nominate one mentor in a given year.

Nomination Process

- Nomination letters must be submitted by one individual.
- More than one unique letter can be submitted about the same mentor, as long as such letters are from different mentees. However, the number of mentees that submit letters about a given mentor will not be a criteria for judgement in the selection process.
- Nomination letters should be no more than 1,000 words.
- If, for any reason, a written letter cannot be submitted, the committee will accept an audio file no more than 5 minutes.
- Nomination letter(s) should include:
 - o Nature of mentor/mentee relationship (e.g., advisor, internship coordinator, employer, etc.).
 - o Duration of mentor/mentee relationship.
 - o Qualities the mentor possesses that make/made them a good mentor, and how the mentor exhibits these qualities.
 - o Examples that set the mentor apart from other mentors, especially qualities that go beyond requirements of the mentor's job.
 - o Nominations will be reviewed by the Student Involvement Co-chairs, and the yearly winner will be announced at the Annual Conference.

MENTOR INFORMATION & CONTACT DETAILS

Name of Nominated Mentor _____

Mentor's Affiliation _____

Mentor E-mail _____ Mentor Phone _____

MENTEE/NOMINATOR INFORMATION & CONTACT DETAILS

Name of Nominator/Mentee _____

Mentee's Affiliation _____

Are you a current SSSS Member? Yes No (All Nominators/Mentees must be current SSSS Members.)

Mentee E-mail _____ Mentee Phone _____

Mentor Relationship ___ Advisor ___ Instructor ___ Intern Coordinator ___ Employer

___ Other (Please specify) _____

Length of Relationship ___ 1-2 years ___ 2-3 years ___ 3-4 years ___ 4-5 years ___ 5+ years

MENTEE/NOMINATOR SIGNATURE

By signing your name below, you understand that you are nominating only one individual for consideration of this award in the current year, and that you are a 2020 SSSS member. If you are the Group Lead of a group nomination, by signing your name below, you understand and confirm that each mentee from your group nominated only one individual for consideration of this award in the current year, and confirm that all mentees are 2020 SSSS members. Your typed name will serve as your signature.

Signature _____ Date _____