

Date Received		EMIS ID #	
Ethics Official		IC	
Employee Name			
Full Name of Award			
Award Sponsor			
Event Date	Event Location		
Sponsor's Contact			
Phone Number	Email		

**ALL GIFTS ASSOCIATED WITH AWARD:**

Cash/stipend/cash equivalent \$

Tangible gift (e.g., trophy, crystal bowl, sculpture) \$

**Other Gifts being offered:**

Award Ceremony Dinner, reception, entertainment \$

Can be accepted under WAG mechanism?  Yes  No

Travel expenses (e.g., meal, lodging, transportation, waived registration) \$

Can accept under Sponsored Travel?  Yes  No

List other items

Total value of other items \$

Is Award on NEO's Approved List?  Yes  No If Yes, date approved:

*If Yes, confirm no changes to:*

- Cash Prize Amount  Lecture Requirement  Selection Process  New Gifts Offered

Can the employee's performance or non-performance of their official responsibilities have any effect on the donor (5 CFR 5501.111)?

- Yes  No *Documentation of confirmation must be included with package*