

NOMINEE: \_\_\_\_\_  
TITLE: \_\_\_\_\_ DEPT: \_\_\_\_\_  
YOUR NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_  
DEPT: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_  
RELATIONSHIP TO NOMINEE: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

**Purpose:** Recognition of the special skills, dedication and compassion in the delivery of outstanding direct patient care.

**Eligibility:** This important award will be given to an individual or Department who provides consistent support to the Department of Nursing's efforts to improve practice and achieve goals that reflect excellence in patient care.

**Award:** The award winners will be announced and presented during Nurses' Week.

**Instructions:** Please describe in at least 300 words or more how this nominee has embraced their role and demonstrated outstanding patient care. Please feel free to include examples where this nominee has gone above and beyond to make a difference with other staff members and /or patient(s).

**Submission:** Once you have completed the form, you can email to **Lydia Lopez**, [lydlopez@montefiorennyack.org](mailto:lydlopez@montefiorennyack.org) or bring printed form to Ana Polanco, Center for Learning and Development office, 2<sup>nd</sup> Floor (across from the elevator).