Nurses’ Alumni Association Awards Nomination Form

Each year, the Nurses’ Alumni Association (NAA) honors alumni and friends who are committed to the key values and missions of the Nell Hodgson Woodruff School of Nursing (NHWSN) and NAA:
- NHWSN’s mission is to educate nurse leaders and scholars, generate new knowledge, and improve health and health care, all in service to the global community.
- NAA’s mission is to advance the school’s mission by promoting lifelong relationships among alumni and strengthening their connection to the school through social, professional and philanthropic opportunities.

The awards are presented during Homecoming weekend. Please review the criteria below and nominate a classmate, colleague or friend who has meant much to the profession and to the Nell Hodgson Woodruff School of Nursing (NHWSN).

Nomination Criteria:
1. Complete the following fields with information as it relates to the specific award or submit an online nomination at www.nursing.emory.edu/awards
2. In addition to your response to the fields, please also submit a statement of 500 words or less describing how the nominee meets the award criteria to alumni@nursing.emory.edu.
3. A copy of the nominee’s most recent resume/CV, articles, videos, or other supporting materials that highlight the nominee’s contributions to the nursing profession is also encouraged, if necessary the School’s alumni office can request the resume/CV.

General Guidelines:
1. All nominations are considered for three years, unless otherwise indicated by the nominator.
2. The Awards Committee will not conduct independent research on a nominee and the committee will only consider information that is part of a submitted nomination.
3. The Awards Committee will not consider nominations consisting solely of a nominee’s resume – the nomination form and qualifications statement must also be included.
4. Active NAA board members are ineligible to receive awards.
5. Award recipients must attend the awards celebration to receive their award.
6. Nominations will not be accepted after the deadline of March 28, 2016.

Nominator:

Your Name: ___________________________ Degree & Class Year(s): __________________
Employer: ____________________________
Title/Profession: ______________________
Preferred Email: ______________________ Preferred Phone Number: ________________
Address: ______________________________

Award Nominee:

Name: ___________________________ Degree & Class Year(s): __________________
Employer: __________________________
Title/Profession: ______________________
Preferred Email: ______________________ Preferred Phone Number: ________________
Address: ______________________________
Nurses’ Alumni Association Awards
(select one from the six choices below):

**Alumni Awards:**
- **Distinguished Nursing Achievement Award** is awarded to a NHWSN alumnus whose career has demonstrated continuous and exemplary contributions to the profession of nursing and/or healthcare.
- **Award of Honor** is awarded to a NHWSN alumnus who has contributed exceptional service/support to the School of Nursing and/or the NHWSN Alumni Association.
- **Excellence in Nursing Award** is awarded to a NHWSN alumnus who has demonstrated exceptional contributions to the profession of nursing and/or healthcare in research, education, clinical practice, management/leadership, public health or community service.
- **Recent Graduate Award** is awarded to a NHWSN graduate from the past ten years who has contributed exceptional service to the NHWSN Alumni Association, the School of Nursing, and/or to the profession of nursing. The individual’s contributions to the nursing profession may be in one or more nursing practice specialties: research, education, clinical practice, management/leadership, public health and/or community service.

**Non-Alumni Awards:**
- **Distinguished Nursing Achievement Award** is awarded to an individual who is not an alumnus of the school, but whose career has demonstrated continuous and exemplary contributions to the profession of nursing and/or healthcare.
- **Honorary Alumni Award** is awarded to an individual who is not an alumnus, but who has become a notable and important part of the School of Nursing family because of their dedication and distinguished service/support to the School of Nursing.

Please answer the below questions about the nominee to the best of your ability:

**Professional Achievement:**
Please describe the nominee’s work and professional achievements as they relate to nursing and healthcare. *Questions to consider: What is the scope of the nominee’s work? What key activities is the nominee responsible for? What is the impact (and future impact) of the nominee on the profession locally, nationally and/or internationally?*

**Dedication to Nursing & Healthcare:**
Please describe how the nominee’s work (volunteer and paid) has contributed to advancing and improving nursing and healthcare. *Questions to consider: what significant contributions has the nominee made? What is the impact (and potential impact) of contributions? What is the likelihood of their work impacting the future of nursing and healthcare?*
Service & Support to Emory, Nell Hodgson Woodruff School of Nursing & Nurses’ Alumni Association:

Please describe how the nominee has represented the missions of the school and alumni association (missions listed on 1st page). Questions to consider: what service and contributions has the nominee made to Emory? To the School of Nursing? How has the nominee been involved with the Nurses’ Alumni Association? What impact has the nominee’s involvement, service and contributions made?

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Awards & Recognition:

Please share any awards or recognition the nominee has received for their contributions to nursing and healthcare. Questions to consider: What previous awards, verbal accolades and/or media attention has the nominee received? Has the nominee been recognized by their employer and/or in their community? In what ways?

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Nominee Resume/CV:

☐ I have included a copy of the nominee’s resume/CV
☐ I would like the School to request a copy of the nominee’s resume/CV and note that I have nominated the individual for an award
☐ I would like the School to request a copy of the nominee’s resume/CV, but please keep the nomination anonymous and do not include my name in any communication

Please submit this nomination form along with a statement of 500 words or less describing how the nominee meets the award criteria, and any additional supporting materials. These should be submitted to Kate Balconi by March 28, 2016.

Kate Balconi, Associate Director of Alumni & Constituent Relations
Nell Hodgson Woodruff School of Nursing
1520 Clifton Road, Suite 446
Atlanta, GA 30329
Phone: 404.727.3348
Email: alumni@nursing.emory.edu