

## **SNOM AWARDS NOMINATION FORM**

Annually, the School Nurse Association of Minnesota recognizes its outstanding members in the categories below. Both nominator and nominee must be currently active SNOM members. To nominate a SNOM member simply complete the Nomination Form.

**Nominations MUST be sent to the nominations committee by April 1, 2018.**

Name and title of candidate : \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_

Email: (Work) \_\_\_\_\_ (Home) \_\_\_\_\_

Candidate has been informed of the nomination: YES \_\_\_\_\_ NO \_\_\_\_\_

Select award or recognition:

SCHOOL NURSE OF THE YEAR

SCHOOL NURSE ADMINISTRATOR OF THE YEAR

SPECIAL RECOGNITION (Groups can be nominated for this award)

NATIONAL ASSOCIATION OF SCHOOL NURSES FELLOWS

(Nomination from a current SNOM member who is a NASN fellow)

Retired Licensed School Nurse during the 17 - 18 school year.

**Please describe why you think this person qualifies for this award.**

View award criteria descriptions on the SNOM website. Additional pages may be included.

SNOM nominator: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

