Award Nomination Form

Deadline August 1

AWARD
☐ Diversity in Health Care Award
☐ Excellence in Nursing Practice Award
☐ Labor Leader of the Year Award
☐ Cheryl L. Johnson, RN, Labor Legacy Award
☐ Nurse Hero Award
☐ Outstanding Contribution to MNA Award
☐ Carolyn Hietamaki Political Nurse Activist Award

NOMINEE ☐ MNA member
Name ________________________________
Address ________________________________
City/State/Zip ________________________________
Employer ________________________________
Credentials ________________________________
Personal Email ________________________________
Cell # ________________________________
Home # ________________________________

NOMINATOR ☐ MNA member (required)
Name ________________________________
Address ________________________________
City/State/Zip ________________________________
Employer ________________________________
Personal Email ________________________________
Cell # ________________________________
Home # ________________________________

Complete this nomination form and submit with
- Nominee’s biographical data and work overview - Biographical data and work history, including national, state and local leadership activities.
- Narrative statement - Describe the nominee’s accomplishments that specifically meet the award criteria.

All information must be submitted by August 1 for consideration.
Only requested material will be considered.

Send nomination form and supporting material to:
Nominations Committee c/o Carol Feuss
Michigan Nurses Association
2310 Jolly Oak Road, Okemos, MI 48864
carol.feuss@minurses.org or 517-349-5818 (Fax)