



OUTSTANDING HEALTHCARE AWARDS NOMINATION FORM

Winners Announced at our 14TH Annual Black Cat Ball
Saturday, September 21, 2019

The Campbell County Healthcare Foundation is an independent Community leader enhancing and developing healthcare in Campbell County. For the last 13 years, the Campbell County Healthcare Foundation's Black Cat Ball has been a formal venue to honor people working in healthcare-related fields that have made a difference in our community. We encourage you to think about who has been influential in improving healthcare in Campbell County and deserves to be honored.

NOMINATION CRITERIA

*The nominee can be an individual or group that has made a significant contribution to the health of individuals or groups in the community through **all three of these categories.***

Leadership

- Develops innovative ways to help others
- Inspires and encourages peers to improve quality by being a role model
- Demonstrates vision
- Takes initiative to make things happen
- Exemplifies the spirit that motivates others to follow

Community Service

- Demonstrates an ability to work with others, and has an innovative and creative outlook.
- The nominee has contributed time, enthusiasm, and energy to the community
- Impact of service
- Length of service

Professional Development/Dedication

- Demonstrates commitment, competency, and contributes to advancement of their profession.
- Expands beyond day to day requirements of their position
- The nominee has contributed talents to their profession by being the "first" whether it is within practice, education, program development, administration, government, community activities, or any other first.

NOMINATION INFORMATION

Name of Nominee: _____

Job Title: _____

Professional Credentials (i.e., MD, RN): _____

Employer/Organization: _____

Work Phone Number: _____ Email: _____

Work Address: _____

Supervisor's Name (if applicable): _____

Supervisor's Phone: _____

Briefly describe the nominee's job description: _____

Describe in details the nominee's dedication in "getting the job done", his/her personal growth and professional strengths and the quality & quantity of his/her work: _____

Describe in detail any special service to fellow employees, individuals, organizations or communities: _____

Are there any ways in which the nominee has distinguished himself/herself? Please explain: _____

NOMINATOR INFORMATION

Nominated By: _____ Phone: _____

Email: _____

Business/Organization: _____

Nominator Address: _____

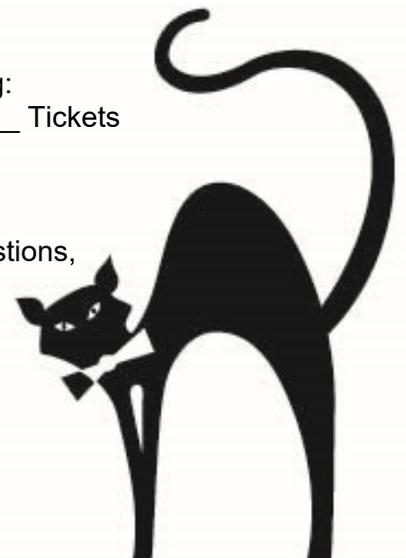
Once all nominations have been received, a representative of the Campbell County Healthcare Foundation may contact you to further research the nominee. Winners will be honored at the Black Cat Ball, held Saturday, September 21, 2019. The top nominees will be recognized and will receive complimentary tickets to the event.

BLACK CAT BALL INFORMATION

I would like to further support the Black Cat Ball by being one of the following:
____ Table Sponsor ____ Award Sponsor ____ Auction Sponsor ____ Tickets

Contact Information

To arrange ticket sales, sponsorships, to turn in nomination forms or for questions, please contact Nachele McGrath, 307.688.6235 or nachele.mcgrath@cchwyo.org



Nomination deadline by mail, fax or email is Thursday, August 1, 2019.