**NC AWHONN’s “Rookie of the Year” Award  
Nomination Form**

**The purpose of this award is to recognize nurses that have been in practice <2 years and the significant contribution they have made in a healthcare organization and/or to the nursing profession. This award is for colleagues providing direct patient care at least 75% of the time.**

**Name of Nominee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Current Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please provide specifics under the appropriate criterion as to how the nominee has demonstrated the characteristics of commitment, dedication, passion, and enthusiasm for improving care delivery as a nursing professional. All applications must be typed, and Curriculum Vitae, bios, and/or resumes will be accepted as supplemental documents for review.**

1. **Describe in one sentence the applicant’s current role** (include percentage of time spent in direct patient care).
2. **Bulleted list of service to healthcare organizations** (e.g., promotes practice guidelines, leadership at the unit/facility level, special professional awards).
3. **Bulleted list of service to the nursing profession and/or school organizations/association(s)** (e.g., AWHONN member, other nursing organization member, AWHONN board representative, school organization member and/or leadership positions).
4. **Bulleted list of contributions to patient care and promotion of well-being (**e.g., positive patient experiences and accolades, implementation of unit-based care initiatives impacting patient outcomes, unit/facility-based committee work to advance practice)**. Feel free to share a compelling story.**
5. **Bulleted list of professional development activities** (e.g., certification in specialty area, formal mentoring/precepting, advanced degrees).
6. **Bulleted list of community service** (e.g., volunteer for community projects, leader of community projects such as community baby shower, community breastfeeding events, creator of annual/continuous community project, or mission trips in the last 3 years).

**Nominator(s) Name(s):**

**Telephone: Email Address:**

**Date: ­­­­­ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Email the Nomination Form to [AWHONN.North.Carolina@gmail.com](mailto:AWHONN.North.Carolina@gmail.com)

Please state “AWHONN Award nomination” in the subject line

**The Deadline for nominations is January 15, 2023 at 11:59 pm.**

**\*\*The recipient will be announced at the**

**2023 NC AWHONN Annual Conference\*\***