**Sigma Theta Tau International
Beta Iota Chapter**

**AWARDS NOMINATION FORM**

Prior to completing this nomination form, please review the attached criteria for the relevant Award. These criteria will be used by the Awards and Scholarships Committee to select the nominees to recommend to the Beta Iota Board of Directors for this year’s Awards. One recipient will be selected per Award category. **Each nomination requires a completed form, a letter of recommendation that addresses the essential award criteria (those with double asterisks), and the nominee’s curriculum vitae (CV) or resume.**

**Nominations need to be received by August 12, 5:00 PM to be considered. We thank you for your nomination.**

**Category \_\_\_\_\_** Excellence in Nursing Practice Award **\_\_\_\_\_** Excellence in Nursing Education Award

 **\_\_\_\_\_** Excellence in Nursing Leadership Award **\_\_\_\_\_** Excellence in Research Award

Date

**Nominator Data (if different from nominee)**

Name and Credentials

How long have you known this nominee? \_\_\_\_\_\_\_\_\_\_\_ In what capacity? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail

**Nominee Data - Must be a Beta Iota member**

Name and Credentials

Address

 Street City State Zip

Phone E-mail

Employer

Position

\_\_\_\_ I am including the nominee’s CV / resume. \_\_\_\_The nominee will send / fax / email the CV / Resume separately.

**Mail this form and documents to:**

Awards and Scholarships Committee – ATTN: Debbie Schwytzer
P.O. Box 11475

Cincinnati, OH 45211

 *OR*

**E-mail: SCHWYTDJ@UCMAIL.UC.EDU**

**If you have questions, please contact Debbie Schwytzer at SCHWYTDJ@UCMAIL.UC.EDU**

Approved: February, 2010

Revised: Feb 2022