

# Panhandle Great 25 Nurses Nomination Form

Nominations are open from May 1 to August 31

\* Indicates required question

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In collaboration with  
Panhandle Organization of Nurse Executives  
Presents



Panhandle Great 25 Nurses

Nomination Form

## Important information before beginning the Nomination Form:

**We recommend that Nominators create a 'Google' account or use an existing 'Google' or 'Gmail' account, so that the form can be saved and edited prior to submission.**

1. Registered Nurses (RNs) with at least **five years of practice in the Texas Panhandle** are eligible for nomination. Healthcare colleagues, peers, supervisors, family and friends may nominate a Registered Nurse from any field in the nursing profession.
2. The **Nominator should interview the RN** to ensure that all criteria have been met and worthy of this prestigious recognition.
3. It is very important for the application to be written **without identifying information in the narrative sections** (e.g. name, place of employment) by referring to the nominee as **'the Nurse'**. Nominations will be reviewed by a panel of judges who will not have access to the demographic data.
4. **Only 1 Nominee per Nominator** will be considered.
5. A complete and well-written nomination must include **specific examples and/or story narratives** about how the Registered Nurse exemplifies the following criteria:
  - **LEADERSHIP QUALITIES**
  - **SERVICE TO THE COMMUNITY**
  - **COMPASSIONATE CAREGIVER**
  - **SIGNIFICANT PROFESSIONAL CONTRIBUTIONS**

Thank you for nominating an extraordinary RN for the Panhandle Great 25 Nurses!

For further information about the Awards Ceremony, sponsorship opportunities, and to purchase individual tickets for the event, please visit the Panhandle Great 25 Nurses website: <https://www.panhandlegreat25.com/>

1. Nominee's Name \*

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2. Nominee's place of employment and Job Title \*

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3. Year of RN License \*

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4. School(s) of Nursing attended and Degrees earned \*

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5. Nominee's Email Address \*

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6. Nominee's Primary Phone contact \*

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7. Nominee's Home Address \*

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8. Nominee's Primary Occupational Role (Mark one category only) \*

Mark only one oval.

- Administration/Management/Leadership
- Advanced Practice Nurse (Practitioner, CRNA, CMW, Clinical Specialist, Consultant)
- Clinical Patient Care Setting
- Community Health (Occupational, Public Health, Home Health/Hospice, School, Clinic)
- Educator (Acute Care, Community/Agency, Higher Education, Clinic)
- Other (Retired, Entrepreneur, Consultant)

9. List all Professional organizations that the Nominee is a member: \*

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10. Your (Nominator's) Name \*

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11. Your (Nominator's) place of employment and Job Title \*

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12. Your (Nominator's) Email Address: \*

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13. Your (Nominator's) Primary Phone contact \*

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14. Your (Nominator's) relationship to Nominee: \*

*Check all that apply.*

- Peer
- Subordinate
- Supervisor
- Family
- Other

15. Please describe and give a specific example/story of how this Nominee demonstrates **LEADERSHIP QUALITIES:** \*

(As a reminder, nominations will be reviewed by a panel of judges who will not have access to the demographic data. We ask that you refer to the Nominee as "the Nurse".)

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- 16. Please describe and give a specific example/story of how this Nominee demonstrates **SERVICE TO THE COMMUNITY** which can include volunteering in the community and/or work-related service within their employment – committees, task force, etc.: \*

(As a reminder, nominations will be reviewed by a panel of judges who will not have access to the demographic data. We ask that you refer to the Nominee as "the Nurse".)

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- 17. Please describe and give a specific example/story of how this Nominee demonstrates being a **COMPASSIONATE CAREGIVER**: \*

(As a reminder, nominations will be reviewed by a panel of judges who will not have access to the demographic data. We ask that you refer to the Nominee as "the Nurse".)

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18. Please describe and give a specific example/story of how this Nominee has made a **SIGNIFICANT PROFESSIONAL CONTRIBUTIONS** which has made them a Great Nurse:

(As a reminder, nominations will be reviewed by a panel of judges who will not have access to the demographic data. We ask that you refer to the Nominee as "the Nurse".)

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*Thank you for nominating a worthy Nurse for consideration as one of the Panhandle Great 25 Nurses! The comments and information you provide may be used in promotional materials, marketing, or with local media as requested.*



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4. **Only 1 Nominee per Nominator** will be considered.
5. A complete and well-written nomination must include **specific examples and/or story narratives** about how the Registered Nurse exemplifies the following criteria:
  - **LEADERSHIP QUALITIES**
  - **SERVICE TO THE COMMUNITY**
  - **COMPASSIONATE CAREGIVER**
  - **SIGNIFICANT PROFESSIONAL CONTRIBUTIONS**

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19. Nominee's Name \*

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20. Nominee's place of employment and Job Title \*

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21. Year of RN License \*

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22. School(s) of Nursing attended and Degrees earned \*

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23. Nominee's Email Address \*

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24. Nominee's Primary Phone contact \*

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25. Nominee's Home Address \*

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26. Nominee's Primary Occupational Role (Mark one category only) \*

Mark only one oval.

- Administration/Management/Leadership
- Advanced Practice Nurse (Practitioner, CRNA, CMW, Clinical Specialist, Consultant)
- Clinical Patient Care Setting
- Community Health (Occupational, Public Health, Home Health/Hospice, School, Clinic)
- Educator (Acute Care, Community/Agency, Higher Education, Clinic)
- Other (Retired, Entrepreneur, Consultant)

27. List all Professional organizations that the Nominee is a member: \*

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28. Your (Nominator's) Name \*

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29. Your (Nominator's) place of employment and Job Title \*

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30. Your (Nominator's) Email Address: \*

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31. Your (Nominator's) Primary Phone contact \*

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32. Your (Nominator's) relationship to Nominee: \*

*Check all that apply.*

- Peer
- Subordinate
- Supervisor
- Family
- Other

33. Please describe and give a specific example/story of how this Nominee demonstrates **LEADERSHIP QUALITIES:** \*

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34. Please describe and give a specific example/story of how this Nominee demonstrates **SERVICE TO THE COMMUNITY** which can include volunteering in the community and/or work-related service within their employment – committees, task force, etc.: \*

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35. Please describe and give a specific example/story of how this Nominee demonstrates being a **COMPASSIONATE CAREGIVER**: \*

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36. Please describe and give a specific example/story of how this Nominee has made a **SIGNIFICANT PROFESSIONAL CONTRIBUTIONS** which has made them a Great Nurse:

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