## Nominee Information

Nominee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Nominator Information

Nominator Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Please type or write legibly and keep the following responses to 150 words or less

*Feel free to use separate sheet of paper if needed*

1. Why do you believe this candidate would be appropriate for this award?

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1. What has this candidate done professionally and/or in their community to make them a strong candidate?

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1. What is one word that you think best describes the nominee? Please explain

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1. How has your nominee been a role model or acted as a mentor to others?

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**Directions for Nomination Submission**

* Ensure the nominee is currently a Registered Nurse in the state of Texas with their current practice location in area of Permian Basin. Permian Basin encompasses the following counties:

|  |  |  |  |
| --- | --- | --- | --- |
| Andrews | Ector | Martin | Terrell |
| Borden | Gaines | Midland | Upton |
| Brewster | Glasscock | Pecos | Ward |
| Crane | Howard | Reagan | Winkler |
| Dawson | Loving | Reeves |  |

* You may submit up to 2 additional support documents in addition to the nomination form. Support documents could be a resume, CV, letters of recommendation, articles, or other media highlighting the nominees’ application.
* The completed application form and attachments must be submitted electronically by **October 31, 2020 at 11:59 PM** to be eligible.
* Incomplete or illegible forms will not be considered.
* Completed forms can be emailed to [**Board@PBGreat25.com**](mailto:Board@PBGreat25.com)
* Nomination forms and additional information are available online at PBGreat25.com
* Announcement of the Great 25 Nurses will be made within the first 2 weeks of December 2020.
* Each Great 25 Nurse will receive public recognition of their accomplishment along with a recognition award for display.