

**EXCELLENCE IN NURSING RECOGNITION  
MAY AWARD ENTRY FORM**

CATEGORY (check one only)

- Nursing Education
- Nursing Leadership
- Outstanding Student Performance

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone--Day: (    ) \_\_\_\_\_ Night: (    ) \_\_\_\_\_

Sigma Theta Tau Member:            Yes  Chapter: \_\_\_\_\_  
  No

**CURRICULUM VITAE OUTLINE**

Education: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Certifications: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Achievements/Honors: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Professional Memberships: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Unique Contributions that qualify the Nominee for this award: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Nomination Submitted By:  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

Send Entry To:  
Robin Lawson  
USA College of Nursing  
307 North University Blvd.  
HAHN Room 4058  
Mobile, AL 36688  
or rlawson@usouthal.edu

Are Supporting Letters Attached? Yes  No  **Nomination Due: April 15**