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NOMINATION FORM

Joan L. Shaver Outstanding Illinois Nurse Leader Award

— Materials Submission Deadline: 10:00 AM, September 11, 2017 —

Characteristics of the Joan L. Shaver Outstanding Illinois Nurse Leader

The Joan L. Shaver Outstanding Illinois Nurse Leader is highly influential in shaping quality health care in the State of Illinois. The award is named after UIC College of Nursing Dean Emerita Dr. Joan Shaver, who established the Power of Nursing Leadership event in 1998 to celebrate excellence in nursing. This award honors the hard work, commitment, and dedication necessary to serve the health care needs of the people of Illinois through supremely skilled leadership and the courage to break through barriers. It symbolizes the celebration of individual achievement and represents excellence in nursing leadership for our state.

The award selection process is administered by the 2017 Power of Nursing Leadership Host Committee. Host Committee members and previous award winners are ineligible for nomination. The recipient will be recognized and must be present at the 20th annual Power of Nursing Leadership celebration on Friday, November 10, 2017.

Nomination Process — Materials Submission Deadline: 10:00 AM, September 11, 2017

Nominee must be a nurse with significant professional experience in Illinois. The following nominating materials should be submitted electronically and received together:

1. Completed nomination form and accompanying letter of support from nominator describing:
 - key professional achievements of the nominee
 - specific strengths of the nominee as a nurse leader, including key examples of significant impact the nominee has had on shaping quality health care in the State of Illinois
2. A minimum of one, maximum of three additional letters of support from individuals who can attest to the nominee's qualifications for the award.

Nominee and Nominator Information

| | | |
|---------------------------------------|---------------|-------------|
| Nominee (include credentials): | | |
| Title: | | |
| Employer: | | |
| Mailing Address (Street): | | |
| City: | State: | ZIP: |
| Daytime Phone: | Email: | |

| | | |
|----------------------------------|---------------|-------------|
| Nominator: | | |
| Title: | | |
| Employer: | | |
| Mailing Address (Street): | | |
| City: | State: | ZIP: |
| Daytime Phone: | Email: | |

— Nominee will be notified upon receipt of nomination. —

ALL NOMINATION MATERIALS ARE DUE BY: 10:00 AM, SEPTEMBER 11, 2017

Return completed nomination form and supporting documents, electronically, to:

Katie Corboy
Email: kcorboy@uic.edu