



## NURSING EXCELLENCE RECOGNITION PROGRAM NOMINATION FORM

77 Berrigan Drive, Ottawa, ON, K2J 4V6  
Tel: (613) 406-3548, [www.cccn.ca](http://www.cccn.ca)

### PLEASE CHECK ONE

- Research Excellence Award in Cardiovascular Nursing
- Health Promotion and Advocacy Excellence Award in Cardiovascular Nursing
- Lynne Child Clinical Excellence Award in Cardiovascular Nursing
- Mae Gallant Leadership Excellence Award in Cardiovascular Nursing

### NOMINEE

NAME: \_\_\_\_\_

CREDENTIALS: \_\_\_\_\_

PLACE OF EMPLOYMENT: \_\_\_\_\_

CONTACT INFORMATION: EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

### NOMINATING GROUP

NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

CCCN MEMBER:            YES            NO

NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

CCCN MEMBER:            YES            NO

NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

CCCN MEMBER:            YES            NO

#### Submit nomination forms and appendices to:

CCCN National Office  
Attn: Awards Committee  
77 Berrigan Drive, Ottawa ON K2J 4V6  
Email [kathryn@cccn.ca](mailto:kathryn@cccn.ca)

**Submission Deadline: March 31<sup>st</sup>**

### ALL NOMINATIONS MUST INCLUDE

1. One (1) letter of nomination (Should address adjudication criteria, and must be no more than two typewritten pages in length)
2. Current curriculum vitae or résumé (Should address adjudication criteria, and must be no more than five typewritten pages in length, highlighting last five years)
3. Current high resolution photo in electronic format
4. Completed nomination form