



Nurse Administrator of the Year Application

Name of Nominee: _____ Credentials: _____

Address: _____ City: _____ St: _____ Zip: _____ Phone: _____

Facility name: _____

Contact person: _____ Phone: _____ Email: _____

1. Attach letters of recommendation, at least two are required please include the contributions that this nominee has made to the facility and /or the profession of long term care and why this nominee is so special. (One letter must be from a resident or the residents' family member/friend/care giver and one letter must be from a supervisor, peer or fellow DON.
2. List innovative practices, facility changes or other novel ways of enhancing long term care that this nurse has designed, coordinated or assisted in implementing.
3. List activities in which the applicant promoted growth or recruitment in long term care nursing
4. Letter indicating why you believe long term care is the nominee's specialty niche.

Attributes expected to be reflected in winning applicants include:

1. DON with above 5 years of experience in long term care
2. Active Member of NADONA
3. Leadership skills demonstrated through practice, innovative changes or other relationship building activities that advance the role of long term care
4. Licensed as a Registered Nurse in the state of Michigan, in good standing
5. Actively mentors nurses at the beginning stages of nursing or entering long term care from other fields
7. Assists colleagues in becoming leaders in their facility/community through peer support, networking and mentoring
8. Recognized in their community as a leader in geriatric nursing

Please complete the above application by September 1st and e mail to: Julie Pudvay at jpudvay@ingham-mcf.org