



ANNUAL LEADERSHIP AWARD

Nomination Form

This annual award of \$400.00 is given by IPN to a Registered Nurse (R.N.) who has successfully assumed leadership roles and who demonstrates creative leadership strategies, mentoring, and motivating others in their professional work. The recipient of the LEADERSHIP Award will receive a complimentary registration for the IPN Spring (May) program, when this award is announced. In addition the recipient will receive a one-year membership to IPN (this can be given to a colleague if recipient is already a member). A complimentary registration for the Annual IPN Leadership Conference (January) will also be provided. The candidate must either live or work in Michigan.

Application: If you wish to nominate a colleague or to apply for the award yourself, complete and return this form by either

- 1.) Typing directly in this form and emailing it as a Word attachment to ipnursing@gmail.com; or
- 2.) Hand-writing on this form and then scanning or saving it as a .pdf document, and emailing it to ipnursing@gmail.com.
- 3.) In the email SUBJECT LINE, type the words "Leadership Award."

Name of Nominee: _____ Email: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Place of employment (include facility name and city/state location): _____

Current Position: _____

Best Phone # _____ (is this at home, work, or a cell? _____)

*Please describe why you believe this person should receive the **Annual IPN LEADERSHIP Award**. Include personal and professional qualities and achievements that support your nomination. [Additional documentation may be attached, including letters/statements from co-workers and the individual's CV or bio form]:*



The Institute of Professional Nursing

*A Nursing Organization Fostering Leadership Through
Education and Collaboration*

P.O.Box 1083
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ipnursing@gmail.com

Continuation of IPN LEADERSHIP Award Nomination:

Your Name (Type or Print): _____ Email: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Best Phone # _____ (is this at home, work, or a cell? _____)

Best time of the day to call you: _____

Please email all attachments to to ipnursing@gmail.com