



In Collaboration With



NOMINATION FORM

I would like to nominate _____ from the _____ unit/department as a deserving recipient of **The DAISY Award**. This nurse's clinical skill and especially her/his compassionate care exemplify the kind of nurse that our patients, their families, and our staff recognize as an outstanding role model. She/he consistently meets many aspects of the following criteria:

Fellow nurses say, "I would want this nurse to take care of my mother"

- Generates enthusiasm and energy towards meeting the challenges of nursing and provides a vision of hope
- Establishes a special caring and compassionate connection with patients and families through trust and emotional support
- Excellent clinical skills
- Dedicated mentor
- Passionate about life
- Team player

Please describe a situation involving the nurse you are nominating that clearly demonstrates he/she meets the criteria for

The DAISY Award:

Thank you for taking the time to nominate an extraordinary nurse for this award. Please tell us about yourself, so that we may include you in the celebration of this award should the nurse you nominated is chosen.

Your Name _____ Unit _____ Phone _____

Email _____ Pager _____

I am (please check one): RN _____ Patient _____ Family/Visitor _____ MD _____ Staff _____ Volunteer _____

Date of nomination _____

Manager Acknowledgement

I acknowledge that this nurse is in good standing.

Signed: _____ Title _____

Nominations received by the 1st of September, December, March, and June will be considered for the quarterly **DAISY Award**.

Please submit this nomination to Nursing Recruitment, Box 63. If you have any questions, please contact

Mary_Tibbetts@urmc.rochester.edu.

