

PHILIPPINE NURSES ASSOCIATION OF SOUTHERN CALIFORNIA

P.O. Box 533 Walnut, CA 91788-0533 • E-mail: info@thepnasc.org • www.thepnasc.org

NOMINATION FORM FOR AWARDS

1	Nominee	
	Address	
	Telephone Number: Home () Work () Cell ()	
	FAX () E-mail	
	Position/Occupation	
	Employer	_
	Business Address	
	PNASC current member \Box Yes \Box No Number of years as a member	
2.	Type of award the nominee should be considered. Check one.	
	Clinical Administration Research	
	EducationCommunity ServiceEntrepreneur	
3.	Justification (The required documents below must be submitted in a timely manner)	
	of the nominee in the particular award category. Submit biodata/resume, documents to support significant achievements and contributions, research paper and a $2x2$ size recent photo. To be considered as potential awardee, the nominee must have a score equal or greater than (>) 85%. Electronic documents are preferred however, hard copies are acceptable.	d,
	If chosen as an awardee, your attendance is required during the award ceremony on May 12, 2	<u>.012.</u>
4.	Attestation I attest to all facts contained in this form and give permission for said facts to be verified and/or used for publication	
	Signature of Nominee Date	
5.	Nomination	
	I wish to nominate the person mentioned above as for the award as indicated.	
	Signature of Nominator Date	
	Name of nominatorAddress	
	Telephone Number: Home () Work () Cell ()	
	FAX () E-mail	
Co	npleted nomination form, justification, photo, and supporting documents <u>must be received by March 26, 2</u> Late and incomplete entries will be invalidated.	<u>2012</u> .
	Mail/Email nomination forms and requirements to: <u>PNASC Awards Committee</u> P. O. Box 533	
	E-mail: rnwarlie@gmail.com Walnut, CA 91788-0533	