

A SEARCH FOR THE 2011 GREAT 100 NURSES

"DO YOU KNOW A REGISTERED NURSE WHO HAS MADE A DIFFERENCE?"

On **April 27, 2011**, the "Great 100 Nurses Celebration" will be held to honor one hundred **Registered Nurses** who have made a significant difference to the profession of nursing and in the lives of patients, peers, and the community-at-large.

Any individual, client/patient, or group may nominate a Professional Registered Nurse. To nominate a Registered Nurse, you must:

1. Complete the attached Demographic Data Form. **PLEASE PRINT.** Identify yourself and the Registered Nurse nominee on the Demographic Data Form **only**.
2. Attach a **one page** letter of recommendation which provides supportive documentation about your nominee. Resumes and curriculum vitae will **not** be accepted. **Letters must be submitted on 8 1/2 X 11 paper, no letterhead, and one-sided printing. Letters which do not conform to this criteria will be disqualified.** The nomination letter **should not include the nominee's name nor specific identification about the Registered Nurse (e.g., place of employment).** The letter of recommendation **MUST** address each of the following categories:
 - **ROLE MODEL**
 - **LEADERSHIP QUALITIES**
 - **SERVICE TO THE COMMUNITY**
 - **COMPASSIONATE CAREGIVER**
 - **SIGNIFICANT CONTRIBUTIONS**
3. Nomination documents **will not** be accepted by fax transmission.
Return all documents postmarked no later than December 31, 2010 to:
THE DFW GREAT 100 NURSES Inc.
9090 Skillman #182A
PMB 303
DALLAS, TEXAS 75243-8262

ADDITIONAL INFORMATION:

- *Previous Great 100 Nurse recipients are ineligible.
- *Duplicate the Demographic Data Form as needed.
- *Nomination letters will be reviewed by a panel of judges who will not have access to the demographic data.
- *Questions concerning the nomination process and the Great 100 Nurses Celebration may be directed to Sandi McDermott, 817.472.4939.



The Deadline For Nominations Postmarked Receipt is: January 7, 2011. There will be no exceptions. Fax Transmittals WILL NOT be accepted. Over-night mail, i.e., FedEx, UPS, WILL NOT be accepted

GREAT 100 NURSES CELEBRATION DEMOGRAPHIC DATA FORM

This form must be submitted with a **one page letter of recommendation** for the Registered Nurse nominee. **Letters must be submitted on 8 1/2 X 11 paper, no letterhead, and one-side printing. No exceptions. Letters which do not conform to these criteria will be disqualified. Please complete the following information. (Please type or print)**

Nominee: _____

Place of Employment: _____

Title: _____ Email: _____

Home Address: _____ Home Phone: (____) _____ - _____

City: _____ County: _____ State: TX Zip: _____ RN License # _____

Nominee's Primary Occupational Role (Mark [X] one category only)

- Administration/Management/Leadership: Specify Setting: _____
- Community Health (Occupational Health, Home Health/Hospice, School, Clinic, or Physician's Office Nursing)
- Advanced Practice Nurse (Consultant, Practitioner, CRNA, CMW, Clinical Specialist)
- Clinical
- Educator (Acute Care, Community/Agency, Higher Education, Clinic)
- Other (Retired, Entrepreneur: Specify Role: _____)

Nominator: _____

Title: _____

Place of Employment: _____

Home Address: _____

City: _____ County: _____ State: _____ Zip: _____

Telephone: (H) Area Code: (____) _____ - _____ (W) Area Code: (____) _____ - _____



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