

APPLICATION FOR
“OUTSTANDING ASSOCIATE DEGREE NURSE IN PRACTICE AWARD”

Criteria (Each school may nominate one)

1. The applicant is registered in Mississippi.
2. ADN is the highest nursing education level of the nominee.
- *3. Statement from nominating school on how nominee
 - demonstrates breadth of knowledge in clinical practice
 - is held in high regard by peers and administration
 - possesses nursing expertise and attributes of a clinical scholar
 - enhances image of AD Nursing
- *4. Resume for nominee that includes evidence of
 - active maintenance of nursing competencies through continuing education
 - active involvement in community affairs
 - active involvement in professional activities

NAME _____
Last First MI

ADDRESS _____
City State Zip

NOMINATING SCHOOL _____

I agree that M-OADN may publish information about me in a newsletter. Yes No

Signature of Applicant **

My school nominates the above applicant for the Outstanding AD Nurse in Practice Award.

Signature of Program Director

*Attachments to application

** **Annual Convention registration waived for nominee**, please indicate on registration form & mail in by the convention deadline (Feb. 27, 2012) to register. Registration form for convention is on the web site; www.moadn.org

Application & Attachments must be **postmarked by March 5, 2012.**

Please mail completed application and all attachments to:

Katina Bell, M-OADN President-Elect
14000 Hwy 82 West Box 5227
Itta Bena, MS 38941

If you have questions, please call Katina Bell @ 662-299-4124 or email @ justkatina424gmail.com