

NPWH ANNOUNCES 2009

Inspirations in Women's Health Award

Who Inspires You?

Deadline for Submissions is August 28th!



Do you know an NP whose achievements caring for women inspires others? Think of the person you work with or know of who makes you want to do your best. Maybe you know of someone whose example in clinical practice, research, or teaching helped you or others to be that much better. Pay tribute to this person by nominating her or him for the **2009 NPWH Inspirations in Women's Health Award**.

There will be three winners; awards will be presented on October 15, 2009, at **NPWH's Clinical Conference** in Providence, Rhode Island. Transportation (within the United States), hotel, and meeting costs will be provided, and a scholarship will be awarded, to three individuals who inspire us all.

For more information about the contest, send an email to Aimee Gallagher at agallagher@npwh.org or call NPWH at 202-543-9693, ext 5.

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Contest forms may be emailed to Aimee Gallagher at agallagher@npwh.org. Except where prohibited, participation indicates that the winner, finalists, and honorable mentions agree, where legal, to the use of their names and/or likenesses by the sponsor for advertising and publicity purposes in all media and on the Internet without further compensation and, upon request, will provide such consent in writing.

NPWH

Inspirations in Women's Health N O M I N A T I O N F O R M

Nominee's name and credentials: _____

Licensed/recognized as a nurse practitioner in (*list states*): _____

Current title/specialty: _____

Affiliation(s): _____

NP education: _____

Address: _____

Phone numbers: (W) _____ (H) _____ (C) _____

Email address: _____

Please explain why this NP is an inspiration to others in terms of her/his contributions to women's health, the community, co-workers, students, or others. Describe what this NP has done that is innovative or beyond what is required in her/his current job position. Give as many details as possible. Please note: (1) The information you provide is the only basis upon which our judges will make a decision; (2) Nominees may help you write this section; and (3) There is a 500-word limit; attach additional pages as needed.

Is this NP involved with a project that would benefit as a result of her/his recognition as a winner of the *NPWH Inspirations in Women's Health Award*? If so, please describe. _____

Nominator's name (*self-nominations are accepted*): _____

Affiliation: _____

Relationship to nominee (*Also, please describe how you know this individual and for how long*): _____

Nominator's phone numbers: (W) _____ (H) _____ (C) _____

Nominator's email address: _____

If you are nominating an NP other than yourself, we encourage you to inform this person that she or he has been nominated. It is an honor to be nominated whether or not the NP becomes a finalist. It also eliminates the possibility that the nominee is unable or unwilling, for any reason, to accept the award.

- Check here if you wish to remain anonymous to the nominee.
 Check here if the nominee is aware that she/he has been nominated.

FORMS SHOULD BE RECEIVED BY AUGUST 28, 2009.

Please fax to 202.543.9858 or mail to Nurse Practitioner Inspiration Award,
NPWH, 505 C Street, NE, Washington, DC 20002

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