**![C:\Documents and Settings\mecoombs\Local Settings\Temporary Internet Files\Content.IE5\I26HGR9U\MC900339208[1].wmf]() School Nurse of the Year Award 2018** Application

**Name of Nurse:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**School District:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Educational Background:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Biographical Sketch: Write a Paragraph or Two**

**Current Member of USNA? Yes No**

**Member of USNA for the Preceding Two Years? Yes No**

**At Least Five Years Experience as a School Nurse? Yes No**

**List Dates of Experience \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**The Committee Scores All Applicants According to the Nominee’s Qualifications in the**

**Following Areas of Nursing Practice Listed Below.**

**Please Write a Paragraph or Two On Each Area:**

* **Provider of Client Care**
* **Program Manager**
* **Health Education**
* **Professional Development**
* **Political/Legislative Activity**
* **Community Involvement**
* **Research**

**Required: A maximum of Six Letters of Recommendation, which Focus on the Above Seven Criterion.**

**Send Completed Application by June 1, 2018 to:**

Shelly Winn

Cell: 435-201-9207

180 E. 600 N.

Richfield UT. 84701

Shelly.winn@seviersd.org

**2017- 2018**

Mary Ito Award

**Live Well, Laugh Often, Love Much**

**Nomination Due by March 1, 2018**

**Given to a school Nurse for her/his unique contribution to School Nursing**

 Mary Ito served as a school nurse for an Indian reservation in Wyoming. Following her retirement, she moved back to Utah and once again became involved with the nursing profession. Mary enrolled in education courses to maintain her nursing license. She became a member of the Utah School Nurses Association...while all the time retaining her NASN membership. She helped Granite and Jordan districts with their Snellen Eye Testing, often returning to Wyoming to help associates at her former school.

 This award is given in her honor, to a school nurse who has made unique contributions to school nursing by carrying on the inspirational spirit of Mary Ito: to “Live Well, Laugh Often, Love Much.”

**Name of Nominated Nurse: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**School District/Health Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Member of USNA? Yes No (must be a member)**

**Nominated by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Unique Contribution: (Feel free to write on the back of the page)**

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**2017-2018**

During our Annual Spring Conference Awards Ceremony, the awards Committee would love to recognize School Nurses who have received new college degrees, special certifications, School Nurse Certifications, Community awards, District or School Awards, Research Projects, or something special we should acknowledge.

Send Nomination Form to:

Sevier School District Nurses

180 E. 600 N.

Richfield Utah, 84701

Fax: 435-896-8804

Email: shelly.winn@seviersd.org or Jamie.southwick@seviersd.org

Name of Nurse: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School District/Health Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Qualifying Information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Nominated by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Due March 1, 2018