

**BLACK NURSES ASSOCIATION of GREATER
WASHINGTON D.C. AREA, INC.
P.O. Box 55285 Washington, D.C. 20040
www.bnaofgwdca.org**



Black Nurse of the Year Nomination Form

The Black Nurses Association of Greater Washington, DC Area, Inc. is seeking nominations for the Annual Black Nurse of the Year Award. The Award will be granted to a Black nurse who has made a significant contribution to the health of the Black community of the Greater Washington, DC area.

General Information and Instructions:

- The nominee must be a Black registered nurse or a licensed practical nurse who has lived in the greater Washington, DC, area for a minimum of three (3) years and is a US citizen.
- All information is confidential and will not be returned.
- All applicants will be informed of the decision by the Awards Committee.
- A cover letter should include the name of the person or organization making the nomination and a contact telephone number
- Self-nominations are accepted.

To nominate an individual for this award, please complete (typed only) the application form describing how the individual meets the award criteria. Additional consideration will be given to applicants who are members of the Black Nurses Association. Resumes will not be accepted. All applications must be received **by January 22, 2023**

Applications must be typed and mailed to:

Black Nurses Association of Greater Washington, DC Area, Inc.
Attn: BNA Program Committee Chairperson
Post Office Box 55285
Washington, DC 20040
Or: email to: gwenjoh@msn.com

Black Nurse of the Year Nomination Form (con't)

SUBMISSION DATE _____

NAME _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP CODE** _____

TELEPHONE
(PRIMARY) _____ **(SECONDARY)** _____

FAX _____ **E-MAIL** _____

YEARS IN THE GREATER WASHINGTON, D.C. AREA _____

MEMBER OF THE BLACK NURSES ASSOC. OF GREATER WASH., D.C. AREA, INC **YES** _____ **NO** _____

NURSING LICENSE NO. _____ **STATE** _____
EXPIRATION DATE _____

CERTIFICATION YES _____ **NO** _____ **EXPIRATION DATE** _____

SPECIALTY/ORGANIZATION _____

EDUCATIONAL PREPARATION

NURSING PROGRAM COMPLETED

Basic Institution and Completion Date

NLN Approved Yes _____ **No**

Black Nurse of the Year Nomination Form (con't)

ADVANCED EDUCATION (include current enrollment)

Degree	Institution	Completion Date
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EMPLOYMENT HISTORY

List positions held for the last five (5) years, including length of time. Start with current position. If retired, indicate official date of retirement and the institution the applicant retired from.

Position	Institution/Agency	Dates
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1.		
2.		
3.		
4.		
5.		

AFFILIATIONS/ACTIVITIES

List professional, civic and/or church offices, committees, etc. locally, regionally and/or nationally held in the last five (5) years.

Office	Organization	Dates
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Black Nurse of the Year Nomination Form (con't)

HONORS AND AWARDS

Entries should be limited to the last five (5) years. **If retired, limit employment awards to the last 5 years prior to retirement.**

Name of Award	Institution/Organization	Date

Instructions: Describe activities which address the categories provided below. The applicant must respond to the first three (3) categories. Use a blank sheet of paper and follow the format provided.

1. NURSING EDUCATION

- **Impacts the professional practice of nursing and the health of the Black community through excellence in formal and informal teaching.**
- **Demonstrates expertise/leadership in nursing education through various publications, presentations and honors,**
- **Engages in teaching/learning activities that improve the quality and quantity of persons entering/choosing nursing as a career, i.e., preceptors and mentoring,**
- **Provides leadership in nursing education through recruitment, mentoring and other activities supportive of career advancement of Blacks in nursing.**
- **Develops and or presents workshops and other educational activities that promote consumer knowledge and understanding of health requirements in addition to work settings.**

2. COMMUNITY SERVICE (Volunteer Activities Only)

- **Collaborates with community organizations, schools and churches to deliver community-based services such as health fairs.**
- **Demonstrates leadership in the delivery of health services and health education to groups of consumers within their own communities and neighborhoods. (i.e., special projects, wellness centers).**
- **Coordinates nursing volunteer activities such as childhood and adult immunizations, (influenza, pneumococcal, covid testing/vaccination) hypertension screenings.**

Black Nurse of the Year Nomination Form (con't)**3. NURSING SERVICE/PRACTICE**

- Possesses clinical expertise/competence in one or more nursing clinical areas of practice such as maternal/child, community health, psychiatric and medical-surgical nursing.
- Demonstrates advanced practice/clinical competence by attaining professional certification.
- Demonstrates creative approaches to the delivery of quality health care. Serves as preceptor for novice.

Optional Categories: The Applicant may address one or more of the following categories for additional consideration by the Awards Committee (Use a blank sheet of paper and follow the format provided).

4. NURSING RESEARCH

- Conducts research in nursing to increase the body of knowledge about the health requirements of Black consumers.
- Publishes and analyzes research, individually, and/or in collaboration with others.
- Disseminates research results that advance the health of Black consumers.

5. LEGISLATIVE/ POLITICAL ACTIVITIES (Health Focused)

- Participates in health advocacy and public policy to influence and impact the health of black consumers. (i.e., attends Congressional Black Caucus meetings).
- Works cooperatively and collaboratively with others to advance the health care needs of Black consumers. (i.e. ANC, City Council)
- Provides white papers and testimony to legislators delineating the issues/concerns of Black consumers.
- Educates consumers as to the relationship between current and future laws and policies and the health care needs of Black consumers. (i.e., reports to Nursing organizations and groups)

Black Nurse of the Year Nomination Form (con't)**6. NURSING MANAGEMENT**

- **Demonstrates management skills.**
(i.e., Team Leader in an Acute or LTC setting)
- **Demonstrates leadership by promoting administrative and managerial best practices and standards in patient-centered health care delivery settings. (i.e., Head Nurse/Unit Coordinator)**
- **Provides and promotes optimal supervisory climate, career mobility and educational opportunities (tuition remission, flexible work schedules) and mentoring for nurses at all levels. (i.e., Department of Nursing Hospital/Long Term Care Facility)**

Revised 10/14, 12/19, 11/11/2020, 10/21, 11/2/2021