



IHCA Skilled Nursing Employee of the Year

IHCA is excited to recognize and honor members of your team who consistently demonstrate professionalism, a focus on customer service, and dedication to vulnerable adults who live in nursing homes, assisted living communities and intermediate care facilities. We all know of at least one person we work with who goes above and beyond to better the lives of residents and their families. Please honor those individuals by submitting an award application in their name. ***Please note that nominations are only accepted from MEMBER facilities of IHCA who are in Good Standing AND planning to register and attend the 2018 convention.***

Nomination Procedures

Application Form & Application Questionnaire should be filled out by someone having knowledge of the nominee's experience. Provide specific examples of the actions, activities and behaviors of the individual. The association will acknowledge the receipt (via email) of all nominations.

THE DEADLINE FOR SUBMITTING NOMINATIONS IS June 1, 2018.

All nominations must be at the IHCA office by close of business on June 1, 2018. The nominator will be notified in mid-June, 2018 if their nominee was selected as the award winner.

Selection Procedures

The Award Selection Committee will review nominations and select the recipient(s). The Award Selection Committee will consist of members of the Convention/Education Committee, IHCA staff, and a guest committee chair.

Award

The award will be presented in Boise, Idaho at the IHCA Awards Lunch on Thursday, July 19, 2018, Boise Centre, 11:45am-1:30pm. ***Award recipients must be able to attend the awards lunch held on July 19.*** Inability to attend may prompt the committee to choose another qualified candidate, unless extenuating circumstances are noted. If this is the case, please contact us at IHCA, PRIOR to submitting your nomination.

Prize Package

In support of the IHCA Awards, the IHCA Foundation will provide \$500 cash award. The winners from the following award categories will be entered into a drawing for this fantastic prize:

- Assisted Living Employee of the Year,
- Intermediate Care Facility Employee of the Year, and
- Skilled Nursing Employee of the Year.

The winner will be announced during the IHCA Awards Lunch on Thursday, July 19.

Return the Application Form and Application Questionnaire no later than **June 1, 2018** to:

Email: monica@idhca.org; Fax: 208-342-6891

Mail: 1524 W. Cayuse Creek Drive, Meridian, ID 83646



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APPLICATION FORM

NOMINEE INFORMATION

NAME: _____ TITLE: _____

FACILITY NAME: _____

YEARS OF SERVICE IN CARING FOR THE FRAIL,
ELDERLY AND/OR DISABLED (1 YR MINIMUM): _____

Will this individual be able to attend the Awards Lunch held in Boise, Idaho on Thursday, July 19, 2018?

Yes No

If "No", please contact us PRIOR to submitting your nomination.

NOMINATED BY

NAME: _____

RELATIONSHIP TO NOMINEE: _____

CONTACT INFORMATION

PHONE #: _____ EMAIL: _____

(MUST include name and contact information of nominator for application to be processed)

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