



## ST. LOUIS SUBURBAN SCHOOL NURSE ASSOCIATION RISING STAR

**Description:** An award to recognize a new school nurse who has made an impact in her school or community as an emerging leader in school nursing.

**Eligibility:** To be eligible for Life Membership, the nominee must meet all of the following criteria. Please check all criteria below:

- ☐ Registered professional nurse or a licensed practical nurse.
- ☐ Currently practicing as a full time school nurse.
- ☐ Has worked in school nursing less than 3 years, including current year.
- ☐ Current member of SLSSNA

### Procedure for Submission of Application:

Submit the following to the SLSSNA Awards Chair **October 15<sup>th</sup>** to **Meagan Lozano** at **presidentelect@slssna.com**

1. Above criteria eligibility checklist
2. Completed nomination form-see the back of this form
3. Letter or letters of recommendation(s) supporting the qualifications of the nominee, listing contributions to school nursing



ST. LOUIS SUBURBAN  
**SCHOOL NURSES**  
ASSOCIATION

## ST. LOUIS SUBURBAN SCHOOL NURSE ASSOCIATION

### RISING STAR NOMINATION FORM

Name of Nominee \_\_\_\_\_

Nominee's Home Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone # (Cell) \_\_\_\_\_ (Work) \_\_\_\_\_

Present position \_\_\_\_\_

Number of years working as a school nurse \_\_\_\_\_

**Notification of award winners will be sent via email to award winners, their principal, lead nurse, and superintendent, the nominator, and those sending letters of support.**

	Name	email address
<b>Nominator</b>		
<b>Letter of support from</b>		
<b>Letter of support from</b>		
<b>Letter of support from</b>		
<b>Nominee's School</b>		
<b>Nominee's School District</b>		
<b>Nominee's Lead Nurse</b>		
<b>Nominee's Superintendent</b>		
<b>Nominee's Principal</b>		

Date nomination submitted \_\_\_\_\_

Date nomination received \_\_\_\_\_

Date nomination reviewed \_\_\_\_\_