**Community Health Association of Mountain/Plains States**

**2019 Awards Nomination Information**

Please join CHAMPS in recognizing outstanding individuals in Region VIII (CO, MT, ND, SD, UT, and WY) by nominating a colleague for an award to be presented at the [CHAMPS Annual Primary Care Conference](http://champsonline.org/events-trainings/annual-primary-care-conference#2019) in Seattle, WA, October 5-8, 2019 at the Grand Hyatt Seattle. The CHAMPS Executive Committee will review all nominations, and awards will be presented at the CHAMPS Board of Directors meeting, currently scheduled for Sunday, October 6, 2019 from 5:00-6:30 PM.

Award Categories:

* Exceptional Administrative Leadership
* Exceptional Board Leadership
* Exceptional Clinical Leadership
* Outstanding Advocate of the Underserved
* Outstanding Legislative Leadership
* Stanley J. Brasher Legacy

*The Stanley J. Brasher Legacy Award was created by the CHAMPS Executive Committee in 2013 to honor individuals who have dedicated their careers to solving the problems of health, poverty, and human rights and who have contributed toward the mission and recognition of community and migrant health centers in the Mountain/Plains States.*

**Note:** All nominees must be affiliated with a current Organizational Member of CHAMPS, with the exception of nominees for the Outstanding Legislative Leadership Award. For a complete list of current CHAMPS Organizational Members, please visit [www.CHAMPSonline.org/about/champs-overview/champs-organizational-members](http://www.CHAMPSonline.org/about/champs-overview/champs-organizational-members).

Nominating organizations may submit only one award nomination per individual candidate, and each candidate may be nominated in only one category.

Please forward your award nominations (using the attached form) to Andrea Martin at CHAMPS by **Friday, July 26, 2019**.

Andrea@CHAMPSonline.org

Phone: (303) 867-9581

Fax: (303) 861-5315

600 Grant Street, Suite 800

Denver, CO 80203

***Thank you!***

***NOMINEE***

Name:

Title:

Organization:

Years of Service:

Address:

E-mail:

Phone/Fax:

***CATEGORY OF AWARD/NOMINATION***

Check the name of the award you are nominating this candidate for (select ONE):

\_\_\_\_ Exceptional Administrative Leadership Award

\_\_\_\_ Exceptional Board Leadership Award

\_\_\_\_ Exceptional Clinical Leadership Award

\_\_\_\_ Outstanding Advocate of the Underserved Award

\_\_\_\_ Outstanding Legislative Leadership Award

\_\_\_\_ Stanley J. Brasher Legacy Award

***NOMINATED/SUBMITTED BY***

Name:

Title:

Organization:

Address:

E-mail:

Phone/Fax:

***Please continue to the Nomination Statement on the following page.***

***NOMINATION STATEMENT***

Please describe why you are nominating this person for an award. You may type your nomination statement below, or submit it on a separate form. ***However, please limit your nomination to a total of one page.***  Thank you!