

Medique Leadership Award Nomination Form

Thank you for your interest in applying for the Medique Leadership Award. The Medique Leadership Award is awarded by OAOHN to an outstanding Occupational Health Nurse Member, who has exhibited leadership in participating in the association and professional activities. Please complete the information below and submit to the Awards Chairperson by the deadline below.

Nominee*	
Position Title	
Company*	
Address*	
Address 2*	
City*	
State*	
Zip*	
Synopsis of OHN Responsibilities*	
Professional Associated Affiliations (Describe Role in Association(s), Office, Committees, Chairmanships, etc.)*	
Initiative*	
Productivity*	
Motivation*	
Creativity*	

Commitment*	
Nominated by*	
Position/title	
Address*	
Address2*	
City*	
State*	
Zip*	
Phone*	
Ext*	
Fax*	
Email*	
Please note: Medique Products does not choose Medique Award Winners. That responsibility lies with each state's OHN award committee. All nominations received will be forwarded to the appropriate committee as quickly as possible. In order to expedite this process, please provide your chairperson's contact information below.	
State OHN*	
Chairperson*	
Email*	
*Denotes a required field	

Forward completed application to OAOHN Awards Chairperson
By October 20, 2017:

Peggy Berry
74 W. Whipp Rd.
Dayton OH 45459

Or scan and email to: paberryrn@msn.com

For Questions – Reach out to Peggy at:
937-304-4922 or paberryrn@msn.com