Passavant
AREA HOSPITAL

Employee of the Month Nomination Form

Passavant Area Hospital is proud to have a wonderful staff of caring, dedicated individuals. We welcome the opportunity to recognize these individuals through recognition programs such as our Employee of the Month Program. If you know of an employee who deserves this recognition, we encourage you to participate in the program. Anyone may nominate an employee for this recognition. To nominate, please complete the information below in as much detail as possible and place in the attached business reply envelope and drop in the mail, leave at the Nurses Station, or place in the Community Relations Department mailbox. Thank you.

Those Eligible for Employee of the Month

All active employees of Passavant Area Hospital, with the exception of the President & Chief Executive Officer, Vice Presidents, department heads, staff physicians, members of the Employee Relations Committee, and those who have been chosen Employee of the Month during the previous four years are eligible for the award.

Nomination for Employee of the Month

Name _____ Department _____

Please describe why you think this employee merits an employee recognition award. Criteria to consider when nominating an employee include personal and professional appearance, confidentiality, outstanding interpersonal skills (especially with co-workers, patients, and visitors), and outstanding service and respect for Passavant Hospital. Please use specific examples where applicable. Please use the back of this sheet for additional comments. **If no comments about the person you are nominating are written on this form, the nomination <u>will not</u> be considered.**

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Signature of Nominator Date

Form must be signed to be valid.

ERC Use Only
Date Rec. _____
Dept. Head Verif. _____