



## MINNESOTA SOCIETY OF RADIOLOGIC TECHNOLOGISTS PATRICIA DAUN AWARD NOMINATION FORM

Submit a single nomination form for each nominee. Please print all required information

### NOMINEE INFORMATION

Nominee: (First, Middle Initial, Last Name) \_\_\_\_\_

Home Address: \_\_\_\_\_

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

Nominee's E-mail Address (If Known): \_\_\_\_\_

Phone: \_\_\_\_\_ Year Nominee Joined MSRT: \_\_\_\_\_

Nominee's MSRT Region Participation: \_\_\_Northern \_\_\_Central \_\_\_Metro \_\_\_Southern

Employer's Name: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

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

Position/Title of Nominee: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Supervisor Phone: \_\_\_\_\_

#### **If nominee is a Student Technologist:**

Educational Institution: \_\_\_\_\_

Educational Coordinator: \_\_\_\_\_

### ALL NOMINATIONS MUST INCLUDE THE FOLLOWING INFORMATION

1. List the nominee's participation in professional societies, i.e. offices held, committee service or chairmanship, exhibits, essays, etc.
2. List outstanding qualifications of nominee in his/her educational institution or place of employment, i.e. in service presentations, teaching/mentoring, participation in health fairs, tutoring, etc.
3. List volunteer involvement.
4. Include a brief statement supporting your nomination and nominee's eligibility for nominated award.

### NOMINATOR INFORMATION

Nominator's name: \_\_\_\_\_

Address: \_\_\_\_\_

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

E-mail Address: \_\_\_\_\_ Year Nominator Joined MSRT: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Nominator's MSRT Region Participation: \_\_\_Northern \_\_\_Central \_\_\_Metro \_\_\_Southern

Nominator Signature: \_\_\_\_\_ Submission Date: \_\_\_\_\_

**APPLICATIONS MUST BE COMPLETED ACCORDING TO THE PARTICULAR  
AWARD CRITERIA. CAREFUL ATTENTION SHOULD BE DIRECTED TO  
SUBMISSION DATE DEADLINES!!**

**THANK YOU FOR YOUR INTEREST IN THE MSRT AWARDS PROGRAM**



## **MSRT PATRICIA DAUN MEMORIAL AWARD**

Deadline Date: July 15th

Submit Nominations To: Awards Chairman

### **I. PURPOSE**

This award is presented to a student technologist or radiologic technologist who displays the qualities of sincere humanity such as sensitivity, honesty, integrity, desire for continuous growth, a warm smile and a sense of humor. This technologist is truly "Someone I'd want to be with!"

### **II. QUALIFICATIONS**

- A. If the nominee is a student technologist, he/she must be a student enrolled in an accredited School of Radiologic Technology in Minnesota or a graduate of an accredited School of Radiologic Technology. The student nominee must have completed a minimum of nine months of radiologic instruction and be a member of the Minnesota Society of Radiologic Technologists.
- B. A non-student nominee must be a member of the Minnesota Society of Radiologic Technologists.
- C. The nominee must be a person who has shown qualities of sincere humanity:
  1. Sensitive to others.
  2. Honesty and integrity.
  3. Ability to smile and extend warmth.
  4. An eagerness for continuing to grow within him/herself.
  5. Sense of humor.
- D. Nominee must have shown continuous involvement community activities. (Church, choir, night classes, babysitting, etc.)
- E. The nominee may be nominated by any one of the following:
  1. Chief Technologist at the nominee's institution.
    - a. Refer to Guideline C, Number 6 for nominator qualifications.
  2. Any Registered Technologist(s) who has worked with the nominee.
    - a. Refer to Guideline C, Number 6 for nominator qualifications.
  3. A Radiologist at the nominee's institution.

### **III. GUIDELINES**

- A. The nominator must submit a typed explanation describing why the nominee should receive this award, including a summary of the nominee's participation in community activities.
- B. The nominator must complete the application provided for the award.
- C. The application must include the following information:
  1. Full name of the nominee.
  2. Home address and phone number of the nominee.
  3. Name and address of the nominee's educational institution or name and address of place of employment and name of nominee's supervisor.
  4. Date the candidate entered training (month/day/year).
  5. Date the candidate became a member of the Minnesota Society of Radiologic Technologists.

6. Name and address of the nominator and date nominator became a member of the Minnesota Society of Radiologic Technologists. **NOTE:** All nominators must be members of the Minnesota Society of Radiologic Technologists with the exception of Radiologists.
- D. Selection of the recipient of this award shall be chosen by the President of the Society and one other person appointed by the President.
- E. The Awards Chairman will notify the nominator of this award 3 - 4 weeks in advance of the Annual Meeting so that arrangements can be made for the recipient to attend the meeting.
- F. The award will be presented during the MSRT Annual Meeting.