

KEY VOLUNTEER OF THE MONTH

NOMINATION FORM

Nomination Requirements:

- Nominees must be currently active and must have volunteered within the month of nomination.
- Strong candidates have:
 - Positively influenced patients / families – a strong advocate for patient and family centered care and putting them first through UPMC’s Five Core Values.
 - Shown dedication by the length of involvement or by a strong concentration of service.
 - Contributed above and beyond program requirements.
 - Demonstrated leadership ability.
- Staff or board members are ineligible.
- **PLEASE SEND SUBMISSIONS TO: volunteercoordinator@chp.edu no later than the 20th of each month**

Nominee Name:			
Assignment(s):			
Supervisor / Person Nominating:		Department:	
Title			

In what way is this volunteer's involvement in your program unique, innovative or creative? Please be as thorough as possible. Provide stories, examples and other evidence (stories, quotes, data).

What personal characteristics make him/her a successful volunteer? Please provide stories or examples.

Briefly describe the volunteer's role in providing patient and family centered care/support, and how they exemplify at least one core value (Dignity & Respect; Caring & Listening; Responsibility & Integrity; Excellence & Innovation and Quality & Safety). Please detail the value and provide stories or examples.

Additional comments:

NOMINATOR SIGNATURE

Date