

MARILYN GATES AWARD NOMINATION



*Kansas Hospital Human
Resources Association*

TO: MARILYN GATES AWARD SELECTION COMMITTEE

DATE: _____

FROM: _____

Name)

Hospital Name)

Marilyn Gates Award Nominee: _____

Reasons for nomination:

*** The individual nominated should have distinguished themselves as a human resources professional and served KHHRA in such a manner that without their participation, HHRRA would be less significant than it currently is. The nominee should have gone to great lengths to enhance the overall quality of KHHRA, promoted the organization, and demonstrated worthiness for the Marilyn Gates Award. In that regard, the nominee should meet the majority of the following award criteria:

- ❖ **On-going membership in KHHRA.**
- ❖ **Membership in ASHHRA.**
- ❖ **Served as an officer or district director of KHHRA.**
- ❖ **Served on a KHHRA committee while a member of the association.**
- ❖ **Regularly attended KHHRA spring and fall conferences.**
- ❖ **Served on a KHA advisory committee at one time or another.**
- ❖ **Frequent contributor to list-serve activities.**
- ❖ **Actively involved with respective KHHRA district meetings.**

Send completed nomination form to:

**MILISSA METCALF
C/O GRAHAM COUNTY HOSPITAL
P. O. BOX 339
HILL CITY, KS 67642**

* Past years' Marilyn Gates award winner will chair a selection committee made up of herself/himself along with the winners from the two preceding years. The award is to be presented at the annual KHHRA Spring conference.