



NOMINATION FORM
Consuelo Gomez Arabit Award

Nominator Instructions

1. Complete the nomination form.
2. Read the mechanics.
3. Obtain two (2) letters of endorsement of which one may be made by the nominator. (see next page)
4. Submit completed nomination materials to Ms. Rajel M. Belen (Chair, Awards Committee)

Applicant Information

1. Personal Information

Name:

Address:

Home Phone No.

Work Address:

Work Phone No.

Cell phone No.

2. Educational Attainment (please attach credentials)
3. Employment History (please attach supporting documents)
4. Exemplary performance/ professional competence (please attach documents)
5. Active involvement in ORNAP (please attach supporting documents)
6. Exemplary contribution to nursing (please attach documents)

Nominated by:

Name & Signature

Position

Conformed by:

Name and Signature of Candidate



THE CONSUELO GOMEZ ARABIT AWARD FOR EXCELLENCE IN
PERIOPERATIVE NURSING FOR THE YEAR _____

Letter of Endorsement

I, _____ with current PRC ID # _____, current ORNAP ID
_____, presently residing at _____,

respectfully nominate _____ with current PRC ID # _____, current
ORNAP ID # _____

I have known the above nominee for the past _____ years and I strongly believe that she/he
is qualified to be awarded the Consuelo G. Arabit award for the following reasons:

In 100 words, write why your nominee should be awarded the **Consuelo G. Arabit award for
excellence in Perioperative Nursing**

Cite specific examples of the nominee's accomplishments beyond the normal requirements of one's job in relation to the award for which the applicant is being nominated.

Describe the impact and outcome of these accomplishments on perioperative nursing and on the professional development of nominee and others.

Nominated By:

Conforme:

Signature over Printed Name

Signature over Printed Name