

IMPACT - Staff Recognition

Nomination Form

Instructions: Please complete all areas of the nomination form.

Nominee name: _____

Date submitted: _____ Department: _____

Your name: _____ Contact #: _____

This form may be used to nominate a co-worker to receive a quarterly "Staff Recognition" award.

- Recipients will receive a \$100.00 Visa Gift Card, Certificate of Appreciation, recognition on the IMPACT website and named mentioned at the annual IMPACT Picnic.
- Recipients will also be eligible for selection as the IMPACT Staff of the Year (\$500 Visa Card)
- Staff must be employed with the Agency a minimum of 6 months to be eligible and must be employed at the time of the annual picnic to receive the IMPACT Staff of the Year award.
- Nomination forms must be received by the Human Resources Department no later than 10 days after the end of the quarter (e.g. 2/28, 5/31, 8/31, 11/30) but can be received any time during the quarter.
- Quarterly Award recipients will be selected by the 15th of the month following each deadline.

Nomination Guidelines:

This forms is not for recognizing someone for simply just doing a good job, instead this form is used when nominating a co-worker who has gone "Above and Beyond". For example he or she routinely:

- Demonstrates the values and mission of IMPACT.
- Communicates with respect and understanding to all (consumers, parents/guardians, families, co-workers, management).
- Creates and maintains a customer friendly environment.
- Performs and demonstrates exceptional job duties.
- Promotes Team Work.
- Inspires by example and influences others to do their best.
- Volunteers for or participates in IMPACT sponsored events/activities.

Please check any of the above that may apply and provide examples of how the nominee has routinely demonstrated exceptional qualities in these areas. Use the back of the form if necessary for additional comments. The awards committee will make the decision based on the strength of the examples given.
