

# Salute to HEALTHCARE 2017

Awarded by Lufkin/Angelina County Chamber of Commerce



## WHO CAN BE NOMINATED?

Any individual, institution, professional, student, volunteer or program, who through their individual or collective actions have made an extraordinary impact in the Lufkin/Angelina County healthcare community.

Their acts of service will represent a display of dedication to excellence in their area of expertise beyond the scope of their jobs. Through their commitment to their profession and community, they serve as an inspiration to others in an effort to improve the quality of healthcare and discover new ways to assist those in need.

### I AM NOMINATING (check one)

CATEGORY	DESCRIPTION
<input type="checkbox"/> HEALTHCARE PROFESSIONAL	Physician, Dentist, Healthcare Administrator, Department Head, Allied Health Professional.
<input type="checkbox"/> NURSE	Nurse.
<input type="checkbox"/> INDIVIDUAL OF MERIT	Board Member, Philanthropist, Journalist, Government Official, Company or Foundation Executive, Community Leader, Volunteer.
<input type="checkbox"/> LIFETIME ACHIEVEMENT AWARD	The Lifetime Achievement Award is designed to honor an individual, who, over his/her lifetime, has made a significant impact or changed history in the healthcare industry in Angelina County.

The recipients will be selected by an anonymous committee from all nominees submitted for this award and will be announced at the event.

**All nominations must be received by 5:00 p.m. September 29, 2017 to be eligible for the awards. Recipients will be honored at the Salute to Healthcare Banquet on Thursday, November 9, 2017.**

## PRESENTING SPONSOR



### SILVER SPONSORS

Choice Home Care  
Kovar Capital  
Lufkin Economic Development Corporation  
Pinnacle Senior Living  
Woodland Heights Medical Center

### RECEPTION SPONSOR

Angelina Radiation Oncology Associates

## NOMINATION FORM

### WHAT YOU SHOULD KNOW

The recipient in each category will be selected by an anonymous panel of judges.

The winner in each category will be announced at the Salute to Healthcare event on Thursday, November 9, 2017.

If your nominee is selected as the recipient, YOU will be asked to appear on the video describing the qualifications, achievements and contributions of the candidate. The video shown at the Salute to Healthcare Awards event will feature all recipients.

One winner in each category will be announced at the event.

Nomination forms and materials accompanying the nomination form will become property of the Lufkin/Angelina County Chamber of Commerce and remain on file 3 years with an annual updated nomination form. A short description on the recipients may be printed in the newspaper and Chamber newsletter, Businesslink.



1615 S. CHESTNUT | LUFKIN, TX 75901  
[LufkinTexas.org](http://LufkinTexas.org)

APPLICATION ON BACK →

# NOMINATION INFORMATION

Deadline For Submitting Entries: September 29, 2017

## Nominee: (Type or Print)

Name \_\_\_\_\_ Title \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

## Please submit the following:

1. Attach a brief description of the nominee's achievements and contributions. Explain how these achievements go above and beyond the scope of the nominee's job. Your explanation of why your nominee should be chosen will be a primary consideration of the judge's decision.
2. With reference to your nominee, attach to this application a list of activities, programs, in-kind contributions, etc. that directly benefited the Angelina County community. Please provide as much back-up information (up to 10 pages) to illustrate the involvement and any measurable results attributable to the contribution of the nominee.

Your Name _____	Your Title _____
Your Organization _____	
Address _____	
City/State _____	Zip _____
Telephone _____	Fax _____
Your E-mail _____	

The information contained in this application will remain confidential and will be used solely for purposes of the award selection. Materials submitted will become the property of the Lufkin/Angelina County Chamber of Commerce.

I certify that the information submitted is true and correct to the best of my knowledge.

Nominator's Signature \_\_\_\_\_

### DEADLINE FOR SUBMITTING ENTRIES: SEPTEMBER 29, 2017

Return Entries to:

**Lufkin/Angelina County Chamber of Commerce**

**Salute to Healthcare Nominee**

1615 South Chestnut • Lufkin, TX 75901

Tel: 936-634-6644 • Fax: 936-634-8726

MWheeler@LufkinTexas.org

