



New York State
Office of Alcoholism & Substance Abuse Services
Addiction Services for Prevention, Treatment, Recovery

Arlene González-Sánchez, Commissioner
www.oasas.state.ny.us

**ADDICTION PROFESSIONAL ADDICTION NURSE OF THE YEAR
ADDICTION PHYSICIAN OF THE YEAR
AWARDS PROGRAM – NOMINATION FORM**

Candidate Information

Candidates must be in good standing for at least one year and make a significant contribution to the profession through their work and personal efforts.

Name: _____

Employer: _____

Home Address: _____

Telephone: _____

Please check the award this candidate is nominated for (only one)

- [Addiction Nurse of the Year](#)
 [Addiction Physician of the Year](#)

What outstanding professional attributes does the candidate possess that distinguish him/her from others in the delivery of alcoholism and substance abuse services?

Nominations must be submitted electronically on the proper nomination form.

Self and co-worker nominations are acceptable.

Additional documentation, e.g. letters of support can be submitted.

Deadline for nominations is
July 29, 2011

Submit Nominations to OASAS by
July 29, 2011

E-mail completed form to:
credentialing@oasas.state.ny.us

What specific contributions has the candidate made to the quality of patient care (e.g. improved program and/or patient outcomes and services)?

Provide specific examples of how the nominee has contributed to the body of professional knowledge for the alcoholism and substance abuse field.

Provide specific examples of the candidate's volunteer efforts in the community (other than Mutual Aid).

Nominator Information

Submitted by: _____ Telephone: _____

E-Mail: _____ Relationship to Candidate: _____

Home Address: _____

Signature: _____

(Not required for electronic submissions)