



2010 New York State Association for Rural Health  
Annual Awards Nomination Application

Thank you for recognizing the individual or organization that has provided a significant contribution to rural health. Please complete all sections appropriately and use a separate nomination form for each category or entry.

This nomination is for the following category: (Please check **one**)

- Senator McGee Award
- Dr. Gary Ogden Rural Health Practitioner of the Year
- Rural Health Worker of the Year
- Outstanding Rural Health Program

Please fill out the following information about the Nominee: (Please type or print)

Nominee Name: \_\_\_\_\_ Phone: \_\_\_\_\_

If organization: Please list contact person and Title:

\_\_\_\_\_

Address: \_\_\_\_\_

Organization (If employed): \_\_\_\_\_

Name of Person Making Nomination: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Rural Area Affected By Project: \_\_\_\_\_

Narrative: Please provide a brief summary of why you feel this person/ organization / program should be nominated: (If necessary, additional details may be put on a separate sheet)

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If nomination is a Collaboration, please provide the names of all partners and role they will or have played.

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Names and contact information for three (3) references:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Nominations may be sent to:

NYSARH  
C/O Reid Perkins  
10950 County Rd. 92  
Wayland, NY 14572

**Or by Fax: 585-219-5713**