

BRADFORD SUSQUEHANNA EMS COUNCIL 2008 AWARD NOMINATION FORM

(Form may be copied as necessary)

1. Award Category:

- | | |
|---|---|
| <input type="checkbox"/> <i>First Responder of the Year</i> | <input type="checkbox"/> <i>EMT of the Year</i> |
| <input type="checkbox"/> <i>Paramedic of the Year</i> | <input type="checkbox"/> <i>Emergency Physician of the Year</i> |
| <input type="checkbox"/> <i>EMS Instructor of the Year</i> | <input type="checkbox"/> <i>Rescue Technician of the Year</i> |
| <input type="checkbox"/> <i>Dispatcher of the Year</i> | <input type="checkbox"/> <i>PHRN of the Year</i> |

2. Nominees Name: _____

3. Service of Affiliation: _____

4. a. Reason for Award

- Years of Service (10+ years)*
 Individual Act of Heroism/Life Saving (May 1st, 2007 – April 30th, 2008)
 Community EMS Impact

b. Why should this person receive this award? (Use second sheet if necessary):

5. Name of person recommending this award: _____

6. Daytime phone number: (____) _____ - _____. (For information purposes only).

Nominations must be returned to the EMS Office by 12:00 p.m. Friday April 18, 2008.

Awards will be presented at the 2008 Bradford Susquehanna EMS Banquet.

(May fax to: 570-882-6053; or mail to: 123 West Lockhart Street, Sayre, Pa. 18840)

EMS COUNCIL USE ONLY

Date Received: _____

Level of Certification: _____ **Certification #:** _____

Current Certification Requirements: _____ Yes _____ No

Forwarded to Executive Committee: _____
