



Registered Nurses Association of the Northwest Territories and Nunavut

Box 2757, Yellowknife, NT X1A 2R1
Phone (867) 873-2745
Fax (867) 873-2336
Email: execast@rnantnu.ca

Please complete the following information to nominate a peer as a “Nurse to Know”. The information you provide on the selected nominee will be published in a future edition of the RNANT/NU Newsletter with their consent.

Nominee’s Name _____

Is the nominee an active practicing member? **Yes** **No**

Circle yes or no. If no, please refer to criteria.

Does the nominee promote the nursing profession by acting as a positive role model?
List examples in point form.

The nominee has made a contribution to nursing in the north in one of the following domains. Please mark an x by the domain category for your nominee and provide a list of examples in point form for that category **only**.

- ___ Clinical Practice
- Provides holistic care grounded in evidence-based practice and/or best practices.

- ___ Education
- Demonstrates a dedication to improving the quality of healthcare through nursing education.
 - Demonstrates a commitment to motivate learners and address the needs of individual learners.

—

Research

- Conducts research relevant to practice in a northern setting and population.

—

Leadership

- Promotes a culture and environment where nurses are positive, prepared, involved and empowered.
- Advocates for registered nurses and/or nurse practitioners in the healthcare setting.

—

Policy

- Demonstrates a strong understanding of the significance of policy to the safe, competent, and ethical practice of nursing in the healthcare setting.

Nominator Information:

Name: _____ **Registration No.** _____
Please Print

Signature: _____ **Date:** _____