

## 2023 Outstanding Rural Health Program Nomination Form

### Nominee Information

**The Outstanding Rural Health Program Award recognizes a community, regional, or statewide program involving one or more health professionals or entities that promotes or facilitates the development of rural health delivery systems. Factors considered include coordination of services with other health care agencies to avoid duplication of services, networking and collaboration with other health care entities to achieve common goals, innovation in development and implementation, and lasting impact on populations and areas served.**

#### 1. Nominee Information

<b>Program Name</b>	<input type="text"/>
<b>Organization(s) Involved in Program</b>	<input type="text"/>
<b>Program Primary Address</b>	<input type="text"/>
<b>Address 2</b>	<input type="text"/>
<b>City/Town</b>	<input type="text"/>
<b>State/Province</b>	<input type="text"/>
<b>ZIP/Postal Code</b>	<input type="text"/>

#### \* 2. Program Lead/Primary Contact

<b>Name</b>	<input type="text"/>
<b>Organization Name</b>	<input type="text"/>
<b>Title</b>	<input type="text"/>
<b>Email Address</b>	<input type="text"/>
<b>Phone Number</b>	<input type="text"/>

#### 3. Rural Geographic Area(s) affected by nominee's work

#### 4. Program Information/Resources

Optional: Upload any materials you would like to include that describe the program.

No file chosen

5. Program Website (if applicable)

6. Nominee’s contribution to rural healthcare.

Please attach a word or PDF document with a 300-500 narrative describing the nominee’s involvement in rural health, the significance of the program's contribution to rural health, and how the rural area and residents have benefited from the program.

 

No file chosen

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### Nominator Information

\* 7. Nominated by:

<b>Name</b>	<input type="text"/>
<b>Organization</b>	<input type="text"/>
<b>Address</b>	<input type="text"/>
<b>Address 2</b>	<input type="text"/>
<b>City/Town</b>	<input type="text"/>
<b>State/Province</b>	<input type="text" value="-- select state --"/>
<b>ZIP/Postal Code</b>	<input type="text"/>
<b>Email Address</b>	<input type="text"/>
<b>Phone Number</b>	<input type="text"/>