SAINT LOUIS UNIVERSITY SCHOOL OF NURSING
ALUMNI MERIT AWARD NOMINATION FORM

Purpose: The President and administrative officers of Saint Louis University established the Alumni Merit Award to bring to the attention of the community and the nation in a dignified and dramatic way the end-product of the University's diverse, well-rounded educational program - namely its distinguished graduates.

Award Criteria: Any alumnus/alumna who exemplifies, in his/her daily life, the mission of Saint Louis University. These men and women shall have achieved outstanding success:

- **in their civic leadership, social welfare or professional activities** (include offices held in Civic, Fraternal, Political, Professional, Labor or Community Groups);
- **or in their intellectual or cultural pursuits** (list memberships in Learned or Cultural Societies, articles published, books written, etc.);
- **or has distinguished him/herself in an exceptional way that brings recognition of achievement in nursing** through any of the following: clinical practice, education, and research;
- **or demonstrates continued interest and evidence of support toward the enhancement of the Saint Louis University School of Nursing’s reputation as a national leader in nursing education.**

Note: Full-time Saint Louis University faculty are not eligible to receive the Alumni Merit Award. However, full-time faculty who are at the point of retirement or have already retired are eligible.

Nominating Candidates: Any person may recommend an alumnus/alumna for the Award. The nomination should contain a complete biographical sketch or profile of the person, together with the salient reasons why the nominee qualifies for this unique recognition.

Presentation of the Award: The recipient of the award must accept the award in person at the time of its presentation.

I (we) recommend the following alumnus/alumna to the Saint Louis University Alumni Association for consideration for the Alumni Merit Award:

*Please print or type.*

Birth Name: __________________________________________________________

Married Name: __ ___________________________________________________________________

Home Address: __________________________________________________________

Business Address: __________________________________________________________

Phone:   (Home) ____________________ (Business): _____________________

E-mail:  __________________________________________________________
Education and degrees received from Saint Louis University:

School/College of _________________________ Degree ___________ Year Rec'd _______
School/College of _________________________ Degree ___________ Year Rec'd _______
School/College of _________________________ Degree ___________ Year Rec'd _______

Date of Birth: _________________________ Birthplace: ____________________________

Family Information: (Name of spouse, years of marriage, names and ages of children)
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Please briefly describe nominee's accomplishments demonstrating the criteria noted above and provide details of how the nominee exemplifies in his/her daily life the mission of Saint Louis University.
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Please include a complete biographical sketch, CV, profile, etc. with your nomination.

The above data are fair and accurate statements of facts concerning the above nominee.

Submitted by:  ___________________________________________________________
First Name   Middle/Maiden Name    Last Name

Signature:  ___________________________________________________________

Address:  ___________________________________________________________

Phone:  __________________________ E-mail:  ______________________

Date Submitted:  ________________________

Nominations must be sent to:
Saint Louis University
Dubourg Hall – Alumni Relations
Attn: Kate Flatley
221 N. Grand, Room 354
St. Louis, MO 63103.

Nominations also accepted via e-mail to kflate1@slu.edu. Please direct questions to Kate Flatley at (314) 977-2348 or kflate1@slu.edu

Nominations accepted via mail or e-mail no later than March 30, 2012.