Upper Cumberland EMS Directors Association

Fall Symposium Awards Nomination

**Region 4 AWARD APPLICATION**

**Criteria:** The recipient of this award must be a current Tennessee licensed Emergency Medical Technician, or Paramedic employed by, or volunteers with, a Region 4 ground or air service. The nominee should exhibit professional qualities expected in this venue. There contributions should go above and beyond whether it be in their clinical skill set or in actions that have affected the community or someone in a positive way.

**Submission:** The attached information form should be filled out completely. Please submit in two pages or less why you think this person deserves to be the Region 4 EMT or Paramedic of the year. Please make sure all submissions are legible.

**Eligibility:** Any current licensed Tennessee emergency medical technician or Paramedic that works for a **Region 4** EMS provider whose primary service is providing patient care. This award is not for EMS administrators, directors, or supervisors who are not directly involved in patient care.

**Nominated by:** You can list your name or submit anonymously. It will not affect the submission either way.

**PLEASE COMPLETE THE APPROPRIATE NOMINATION FORM**

Submit Completed Form Packets To:

**PO Box 663**

**Byrdstown, Tn 38549**

**NOMINATION DEADLINE: October 2nd, 2017**

**NOMINEE’S NAME:**

**NOMINEE’S ADDRESS**

**CITY / STATE / ZIP**

**HOME TELEPHONE NUMBER**

**WORK TELEPHONE NUMBER**

**EMAIL ADDRESS**

**PRIMARY EMS EMPLOYER**

**EMS EMPLOYER’S ADDRESS, INCLUDING CITY/STATE/ZIP**

**In 250 words or less, please explain the reason for your nomination:**