

Held Family Award for Nursing Excellence 2025 Nomination Form

The Held Family Endowment for Nursing Excellence awards a Cooley Dickinson Registered Nurse (RN) or Nurse Practitioner (NP) who shows outstanding dedication and compassion in patient care. We encourage patients, families, caregivers, and colleagues to nominate a nurse or nurse practitioner who exemplifies exceptional care and puts patients first.

To nominate a deserving RN or NP, please complete the form below and mail or email to the Cooley Dickinson Hospital Development Office.

Name of Nurse or Nurse Practitioner You Are Nominating: Job title and department: Nominator's Name: Your Phone Number: Your Email: Yes, please share my name and contact email with the person I have nominated so they can thank me. I am also willing to have my name shared at the award ceremony. No, please do not share my name with the person I have nominated. I prefer to remain anonymous. Why do you believe this RN or NP has gone "above and beyond" in providing exceptional, compassionate, and personalized care? (Please provide examples and use extra pages if needed.)		
Nominator's Name: Your Phone Number: Your Email: Yes, please share my name and contact email with the person I have nominated so they can thank me. I am also willing to have my name shared at the award ceremony. No, please do not share my name with the person I have nominated. I prefer to remain anonymous. Why do you believe this RN or NP has gone "above and beyond" in providing exceptional, compassionate, and personalized care? (Please provide examples and use extra pages if needed.)	Name of Nurse or Nurse Practitioner You Are Nominating:	
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Please e-mail completed form to $\underline{development@cooleydickinson.org}$ or mail to Development Office, P.O. Box 329, Northampton, MA 01061-0329.

Thank you for taking the time to recognize outstanding nursing care!