

Proposed HRRMC Foundation Hall of Fame Nominee Process January 2024

The HRRMC Foundation Hall of Fame is an honor that recognizes an individual or individuals who have made outstanding, lasting, and positive contributions to healthcare that impact the HRRMC Hospital District. Awardees are considered to be a healthcare leader, visionary, generous contributor of their time and/or made a significant impact on local healthcare.

Eligibility

- Nominee is not currently employed by HRRMC
- Must have been involved with local healthcare for more than ten years and made a significant contribution to HRRMC.

Key Dates and Deadlines

- Nomination period opens March 15, 2024
- Nomination period closes May 16, 2024 at 3:00PM
- Award will be presented at the 2024 Jewel Ball on Thursday, October 10

Judging Criteria

- Individual(s) made a lasting contribution and significant contribution that impacted local healthcare and HRRMC specifically through one or more:
 - o Time and effort
 - o Leadership, vision, role model, or mentor
 - o Contributed to the success of HRRMC during a time of significant change
 - o Community Involvement that impacted local healthcare
 - o Financial impact
- Contributions must be extraordinary or far exceed the expectations for someone in the candidate's position
- Demonstrated the ability or influence to effect change in local healthcare

Nomination Materials/Documentation – required, except where indicated

- Complete the HRRMC Foundation Hall of Fame nomination form
- Outline of experience: such as a resume, CV, or informal outline
- 1,000 words detailing why the candidate meets the requirements above
- Optional additional documentation demonstrating the candidate's successes up to 10 pages
- Letters of support (optional)

Process

To nominate either:

-email to lezie.burkley@hrrmc.net

-mail to HRRMC Foundation/Hall of Fame PO Box 429 Salida, CO 81201

-hand deliver to Karen Moore, HRRMC Foundation Administrative Assistant at HRRMC Antero Pavilion, 910 Rush Drive on the HRRMC campus

The nominations will be reviewed and chosen by the HRRMC Foundation Scholarship Committee and ad hoc members. Please call Lezie Burkley, HRRMC Foundation Director 719-530-2218 for questions.

**HRRMC Foundation Hall of Fame
2024 Nomination Form**

Name of Nominee _____

Years involved in local healthcare, if a healthcare provider _____

This individual contributed to local healthcare through (respond to one or more):

Time and effort

Financial Donation

Leadership/Vision/Role Model/Mentor

Community Involvement

This individual deserves the honor of HRRMC Foundation Hall of Fame because: (attach 1,000 word narrative)

Name of nominator _____

Email address _____

Phone number _____