

# Heart of HERO Award Nomination Form



## ABOUT THE AWARD

HERO wishes to recognize health and wellness practitioners that have directly impacted the health of their organization and the associated outcomes. This award will be presented to a person directly involved in the day to day operations of employee health management (Wellness Directors, Health Managers, Human Resource) who has made an outstanding contribution towards the advancement of workplace health and well-being within their company.

## NOMINEE

NAME

CRED.

TITLE

ORGANIZATION

ADDRESS

CITY

STATE & ZIP

PHONE

WEBSITE

EMAIL ADDRESS

## NOMINATING PERSON

NAME

CRED.

TITLE

ORGANIZATION

ADDRESS

CITY

STATE & ZIP

PHONE

EMAIL

## Rationale for Nomination

In 500 words or less, please provide the rationale for your nomination.

For specific awards criteria, please visit our web site <http://hero-health.org/awards-2/>. Unless noted, nominees will be contacted directly with an invitation to submit an application.