

# MINNESOTA MEDIQUE LEADERSHIP AWARD DESCRIPTION

## Purpose:

- To recognize leadership of Occupational Health Nurses at a state level.
- To encourage development of leadership skills by members of Minnesota.
- To increase awareness of the role of the Occupational Health Nurse to both employers and the community.
- To assist through the aid of the Medique Award, the educational efforts of the state association.

## Criteria:

**All criteria must be met and documentation must be submitted for consideration.**

1. Applicants must be:
  - a. A current member of MAOHN with at least one year of active membership, with the exception of present MAOHN Board and Officers.
2. Applicants must submit:
  - a. A Leadership Activity Summary/Statement
    - i. document service to MAOHN, a community based organization (i.e. the March of Dimes, American Cancer Society, etc.), or a community effort (i.e. disaster relief, environmental preservation efforts, etc.)
    - ii. Provide historical summary of leadership activities performed and professional/ community based association affiliations (i.e. offices held, committee memberships and/or chairmanships.)
  - b. A Personal Statement  
This statement should include comments on why the applicant should be considered for this award, their leadership philosophy and future aspirations in occupational health. Some qualities/skills that can be expanded on are leadership, initiative, productivity, motivation, creativity and commitment.
  - c. Two letters of recommendation, at least one letter from a MAOHN colleague, addressing the candidate's leadership activities.
  - d. Complete Minnesota Medique Leadership Award Application Form.

## Procedure:

1. Applicants are encouraged to apply by preparing their own packet of required information (described above) or be nominated or assisted by an MAOHN colleague.
2. Mail completed application packet to the Chair of the MAOHN Awards Committee on or before June 1.

## Outcome:

1. Applicants:
  - a. Upon receipt of completed application, the MAOHN Award committee will send letter confirming that completed application was received.
  - b. MAOHN Awards committee will review completed forms and send letter to all applicants informing them of the results of the review of their application.
2. Award Winner:
  - a. Medique Leadership recognition plaque will be presented at a MAOHN fall meeting.
  - b. \$300.00 for MAOHN to use for a continuing professional education offering.

Submit on or before **August 15, 2008** to

MAOHN Awards:  
Penny Barker  
2505 Terrace Drive  
Burnsville, MN 55337  
Questions: 612-672-4717 or [pbarker2@fairview.org](mailto:pbarker2@fairview.org)

# MINNESOTA MEDIQUE LEADERSHIP AWARD APPLICATION Form

**Please complete the following:**

Applicant's Name:

Home Address:

City, State, Zip:

Email:

Home Phone:

Business Phone:

Present Position/Title:

Company Name and Address:

Name and Title of Individual to whom Applicant Reports:

**Step 1- Answer the following questions:**

- a. Are/Is you/applicant a current member of MAOHN for at least one year? \_\_\_\_\_
- b. Are/Is you/applicant currently an MAOHN Board Member/Officer ? \_\_\_\_\_

**Step 2- Attach completed leadership activity and personal statement in an essay format with this application form.**

**a. Leadership activity statement**

- i. document service to MAOHN, a community based organization (i.e. the March of Dimes, American Cancer Society, etc.), or a community effort (i.e. disaster relief, environmental preservation efforts, etc.)
- ii. Provide historical summary of leadership activities performed and professional/ community based association affiliations (i.e. offices held, committee memberships and/or chairmanships.)

**b. Personal Statement**

This statement should include comments on why the applicant should be considered for this award, their leadership philosophy and future aspirations in occupational health nursing. Some qualities/skills to be expanded on are leadership, initiative, productivity, motivation, creativity and commitment.

**Step 3- Letters of Recommendations-**

Attach two letters of recommendation with this application, at least one letter from a MAOHN colleague, addressing the applicant's leadership activities/skills.

**Step 4- Sign and date this application form.**

Signature of Person Completing Form \_\_\_\_\_ Date \_\_\_\_\_