2020 Health IT Leader of the Year Award Nomination Form

Deadline August 31, 2020

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I. Individual Information

Nominee’s name: ___________________________ Title: ___________________________

Organization name: _________________________ Phone: _________________________

Address: ________________________________________________________________

City: ___________________________ State: ___________________________ Zip: __________

Nominee’s email: ___________________________

Assistant’s name: _________________________ Phone:___________________________ Email: ___________________________

Has the individual previously been nominated for this award? ☐ Yes ☐ No

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II. Individual Nomination Information

To be eligible for the Health IT Leader of the Year, nominees must demonstrate leadership in the use of health information technology (HIT) to achieve the Triple Aim of better care, better outcomes and lower costs.

1. Attach a nomination letter (not to exceed three pages) describing why this nominee should be nominated for the Health IT Leader of the Year Award using the criteria below.
2. Include one (1) letter of recommendation (not to exceed two pages) to support the nominee’s nomination.

Health IT Organizational Leadership

- Leadership of an organization or team in the use of health IT to achieve the Triple Aim
- Successful management of health IT projects
- Advancement of successful health IT initiatives for an organization

Leadership in Community Health IT Coordination and Collaboration

- Active engagement and involvement in community health IT initiatives
- Collaboration with other community organizations on health IT projects and initiatives
- The successful convening and coordination of community health IT objectives
Advancement of Health IT Education and Learning

- Leadership of organizational or community health IT education
- Advancement of health IT learning networks
- Advancement of health IT education through presentations and publications

Please submit your completed nomination form to events@healthcurrent.org by the deadline. If you have any questions, please call 602-688-7200 or email us at events@healthcurrent.org.

Nominee’s Signature: ___________________________ Date: ______________________

Print Name: ______________________________________________________________