

## **New England Chapter of the WOCN® Society Outstanding Nurse of the Year Award**

**Nominations Accepted Yearly from April 1 - October 1.**

### **1) Nominee requirements:**

- a. Minimum two years of active membership in the New England Chapter of the WOCN® Society.
- b. Minimum of one current certification recognized by WOCNCB®
- c. See below for additional Nominee requirements located under 3c. a) and b).

### **2) Nominator requirements:**

- a. A New England Chapter of the WOCN Society member or other professional colleague (co-worker, manager, colorectal surgeon etc. is eligible to make a nomination).
- b. Nominator submits a letter of recommendation with practice excellence exemplars and completed form via email to the Membership Chair Karen Baggetta at [newenglandwocnmembership@gmail.com](mailto:newenglandwocnmembership@gmail.com)

### **3) Selection process:**

- a. Membership Chair reviews nominations for completeness.
- b. Membership Chair notifies nominees via email and/or phone.
- c. Nominees are asked to submit the following to the Membership Chair:
  - a. Self-evaluation (max 200 words)
  - b. 2nd letter of recommendation from a professional colleague in addition to the nominator's letter, outlining support for the nominee's eligibility for the award
- d. A Task force of 3 active members: 2 Membership Committee Members plus 1 Board Member or past NOTY award recipient, (or vice versa) will do a blind review of eligible nominee applications.
- e. Award recipient announced at the New England Chapter of the WOCN Society Fall Conference.



# New England Chapter

Wound, Ostomy, and  
Continence Nurses Society®

## Nominee:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone numbers (work): \_\_\_\_\_ (Cell) \_\_\_\_\_

Email: \_\_\_\_\_

Employer: \_\_\_\_\_

## Nominator:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone numbers (work): \_\_\_\_\_ (Cell) \_\_\_\_\_

Email: \_\_\_\_\_

All submissions will be sent electronically to Karen Baggetta at  
[newenglandwocnmembership@gmail.com](mailto:newenglandwocnmembership@gmail.com)

Deadline for submission will be strictly observed.

KB 4/9/23



**WOCN**

Wound, Ostomy, and  
Continence Nurses Society®

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