



# American Association of Critical-Care Nurses Circle of Excellence Awards

## Chapter Nomination Form

### CHAPTER INFORMATION

<b>Chapter Name</b>	AACN-Greater Memphis Area Chapter		
<b>Award Name</b>	President's Award for Chapters		
<b>Contact Person</b>	Anita	K.	Langston
	<small>First name</small>	<small>Middle initial</small>	<small>Last name</small>
<b>Mailing Address</b>	10300 Memphis-Arlington Rd.		
<b>City, State, ZIP</b>	Lakeland, TN 38002		
<b>Phone</b>	901-678-2110	901-867-8943	
	<small>Work</small>	<small>Home</small>	
<b>Email Address</b>	alangstn@memphis.edu	alang106@comcast.net	
	<small>Work</small>	<small>Home</small>	
<b>Employing Institution</b>	University of Memphis		
<b>Institution Mailing Address</b>	610 Goodman Rd.		
<b>City, State, ZIP</b>	Memphis, TN 38152		

### NOMINATION CHECKLIST

- X Completed Chapter Nomination Form
- X Exemplar demonstrating how the chapter embodies the award criteria. *The exemplar must be in Word format, no longer than 800 words, typed, and double-spaced, minimum font size of 10 points. Be sure to include your name and the name of the award at the top of each page.*
- X Letter(s) of support from external groups who partnered with and/or benefited from the chapter project may also be submitted, as appropriate.

The complete packet of materials must be submitted by August 1, 2008 and should be sent electronically to Lynda Benedetto ([awards@aacn.org](mailto:awards@aacn.org)).

For additional information visit [www.aacn.org/awards](http://www.aacn.org/awards).