



## Outstanding Arizona HOSA Advisor Nomination

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Arizona HOSA can recognize one (1) Middle School Advisor, one (1) Secondary HOSA Advisor and one (1) Postsecondary/Collegiate HOSA Advisor representing the state. This is a means of recognizing advisors for the time and effort they expend to provide successful HOSA Chapter activities for their members. The recipient of this honor will be recognized at the Arizona HOSA State Leadership Conference and the International Leadership Conference during the Recognition Sessions. Please utilize this form to nominate the advisor you feel should represent Arizona as our Outstanding HOSA Advisor.

### Eligibility

1. Nominee is a member in good standing with the HOSA: Future Health Professionals and the Arizona Association.
2. Nominee is currently serving as a local advisor to a nationally affiliated HOSA chapter.
3. Nominee has not received this award in the previous five years.

### Nomination

1. An advisor can be nominated by another Arizona HOSA advisor, an Arizona HOSA member, school administrators, or CTE directors.
2. One (1) letter of recommendation should be submitted with the nomination form. The letter of recommendation can be submitted by a HOSA advisor, HOSA student, or school administrator.
3. Completed nomination forms will be reviewed by at least two members of the Arizona HOSA Advisory Board of Directors. No reviewers may be a candidate for this reward.
4. If no nominations are received the recipient will be selected by the Arizona HOSA Advisory Board of Directors and Arizona HOSA State Advisor.
5. The recipient of this honor will be recognized at the Arizona State Leadership Conference (SLC) and the International Leadership Conference (ILC).
6. Travel expenses will be the responsibility of the recipient.
7. Submit the completed nomination form and letter(s) of recommendation to the Arizona HOSA State Advisor via the Wufoo form link:  
<https://azhosa.wufoo.com/forms/q1dfvdb032pavo/>
8. All nominations are due by April 1<sup>st</sup>.



## Outstanding Arizona HOSA Advisor Nomination Form

### Nominator

Name: \_\_\_\_\_  
School: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Zip: \_\_\_\_\_  
Work Phone: \_\_\_\_\_

### Nominee

Name: \_\_\_\_\_  
School: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Zip: \_\_\_\_\_  
Work Phone: \_\_\_\_\_

### Nominee

1. Has been an advisor of a nationally chartered HOSA chapter for \_\_\_\_\_ years.
2. Has been an advisor to a State Officer \_\_\_\_\_ times.
3. Has been to the Arizona HOSA SLC \_\_\_\_\_ times.
4. Has been to the ILC \_\_\_\_\_ times.
5. Has served on the Arizona HOSA Advisory Board of Directors, circle one: **Y** **N**
6. Completed \_\_\_\_\_ community service projects this year.
7. Completed \_\_\_\_\_ HOSA National Service Project activities this year.

### Nominee Outstanding Attributes

Please rank the advisor by circling the most appropriate number from 1 to 5: 1 = average; 2 = above average, 3 = exceeds, 4 = superior; 5 = extraordinary.

DEPENDABILITY	1	2	3	4	5
LEADERSHIP	1	2	3	4	5
HONESTY	1	2	3	4	5
RESPECT FROM PEERS	1	2	3	4	5
MOTIVATION	1	2	3	4	5
FLEXIBILITY	1	2	3	4	5
ENTHUSIASM	1	2	3	4	5
PROFESSIONALISM	1	2	3	4	5
INITIATIVE	1	2	3	4	5

Attach the letter of recommendation to this nomination.

\_\_\_\_\_  
Nominator Signature

\_\_\_\_\_  
Date



## Outstanding Arizona HOSA Advisor Nomination Rubric

**Advisor Name:** \_\_\_\_\_

	None	1 Point	2 Points	3 Points	4 Points	Points Awarded
Years of service as an Arizona HOSA Advisor	Less than 1	1 – 3	3 – 8	9 -11	12 or more	
Number of Arizona HOSA State Officers	NONE	1 – 2	3 – 4	5 - 6	7 or more	
Number of times advisor attended SLC	NONE	1 – 3	3 – 8	9 -11	12 or more	
Number of times advisor attended ILC	NONE	1 – 3	3 – 8	9 -11	12 or more	
Service on Arizona HOSA Advisory BOD	NO				YES	
Number of community service projects	NONE	1	2	3	4 or more	
Number of National Service Project Activities	NONE	1	2	3	4 or more	
Total score on Outstanding Attributes	9 – 14	15 – 24	25 – 34	35 – 44	45	
Letter of recommendation	NO				YES	

**TOTAL** \_\_\_\_\_ /36