



S-SV EMS REGION OUTSTANDING SERVICE AWARD NOMINATION FORM

Please utilize this form to submit a nomination for someone who has done an outstanding job in EMS. EMS includes Dispatchers, First Responders (law enforcement also), EMR's, EMT's, AEMT's, Paramedics, Nurses, Emergency Department Physicians, and EMS educators who have gone above and beyond the call of duty for EMS or had an outstanding field save.

This form can be submitted to the S-SV EMS Agency at any time. S-SV EMS Agency staff will review all nomination forms submitted and select EMS providers who deserve special recognition and receipt of the "S-SV EMS Outstanding Service Award". Awards will be determined on a quarterly basis and recipients will be recognized throughout the year at the appropriate EMCC or other similar county specific EMS committee meeting. In addition, a compilation of the quarterly award recipients for the year will be utilized by the annual S-SV EMS day planning committee to determine recipients of the S-SV EMS Agency annual awards presented during EMS week.

Information on Person Submitting Form

Name Agency
Address Phone #
City State Zip E-mail

An invitation will be sent to you at the address above.

Information on Nominee(s)

Name Phone #
Address Agency
City State Zip E-mail

Please describe the special effort made by the nominee(s) as EMS provider(s). List any or all of the items that led to them being selected for nomination (e.g., dispatch excellence, education, victim services, community service/outreach, public safety related efforts, exceptional medical care, etc.). Please limit to 50 words.