



***Hospice Palliative Care  
Recognition Awards  
The Amanda Finch Memorial Award***

***This award is presented annually in May***

*The nominee in this field must:*

*Be an accredited emergency worker such as paramedic, firefighter, police officer.*

*Show compassion and empathy to patients and their families.*

*Be an advocate for family, colleagues and colleagues.*

*Provide mentorship and education to co-workers regarding the importance of quality end-of-life care in the field.*

*This award is presented as part of the Hospice Palliative Care Recognition Awards and will be given annually.*



*Hospice Palliative Care  
Recognition Award*

**NOMINATION FORM**

We feel our region is fortunate to have many people deserving of these awards. Therefore, we ask that you do not re-nominate someone who has previously been honoured with an award within a period of 5 (five) years.

Please return nomination forms and supporting letters to: Connie Dwyer, 990 Speedsville Road, Cambridge, N3H 4R6.

**Category:**

- Healthcare Professional
- Volunteer
- Advocacy
- Amanda Finch

Name of Nominee: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Address for Nominee: \_\_\_\_\_

Occupation/Place of Employment: \_\_\_\_\_

Nominator's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Nominee has been notified of Nomination: \_\_\_\_\_

Please complete this letter describing the reason for your nomination:

I wish to nominate \_\_\_\_\_ for the \_\_\_\_\_ award because