



**Excellence in Clinical Simulation Training, Education, and Research**

***Practice Award***

***Calendar Year 2019***

**Submit all nomination materials via e-mail to**

**[vhasimexcellenceawards@va.gov](mailto:vhasimexcellenceawards@va.gov)**

**Nominee Information**

<b>Name</b> (as it would appear on award plaque)	
<b>Credentials</b> (e.g., RN, MD, CRNA, FACHE, etc.)	
<b>Position Title</b>	
<b>Location (Facility)</b>	
<b>Phone</b>	
<b>e-mail Address</b>	

**Submitter Information**

<b>Name</b>	
<b>Position Title</b>	
<b>Location (Facility)</b>	
<b>Phone</b>	
<b>e-mail Address</b>	

**Narrative Information**

Do not exceed the space allowed in each block

(Maximum input is 20 lines, in Calibri Font, 12 sized, single spaced. Excess input will not be evaluated)

Provide details that describe the nominee's contribution to system-wide improvements in learners' competencies and proficiencies demonstrate such excellence as to merit recognition from peers.

- 1. The practitioner's significant innovations and contributions to clinical simulation training, education, and research.**

- 2. The practitioner's simulation-based contributions that have improved learners' competencies and proficiencies locally and have been disseminated system-wide. The practitioner's contributions in training, research, and systems probing, that have improved Veterans' health outcomes locally and have been disseminated system wide.**

3. The practitioner's advancement of communication regarding VHA clinical simulation training, education, and research through presentations for VHA and non-VHA audiences and publications easily accessible to VHA clinicians and leaders.

**Required Documentation** includes

- ☐ Short biography, resume, or Curriculum Vita
- ☐ VA Form 0235 Security Check for Candidate Requiring Approval from the Secretary.

**Required Endorsements:**

Nominee's Medical Center Director      Date

Nominee's VISN Director      Date

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