

The Bumble-BEE Award Nomination Form



Name of the employee you're nominating. _____

Where does the employee work at YRMC or what do they do? (e.g., Admitting and Registration, cafeteria employee, social worker)

Please describe a situation or share a story that demonstrates how this person made a difference in your time at YRMC.

Your information (We'll contact you if your nominee receives the Bumble-BEE Award so you can join the celebration.)

Your Name _____

Phone (_____) _____

Email _____

I am a (please check the one that best describes you):

- Nurse Patient Family/visitor Physician YRMC employee
 Volunteer Community member Other _____

Please email this nomination form to YRMCdaisyBee@commonspirit.org
or print and mail to: YRMC Nursing Administration DAISY-BEE Awards
1003 Willow Creek Road, Prescott, Arizona 86301

Thank you for nominating an extraordinary YRMC employee for the Bumble-BEE Award!