

Crusader Community Health 2016 SPIRIT OF CARING AWARDS

44 Years of Caring

Nominate a Caring Individual or Organization!

SPIRIT OF CARING AWARDS

The annual SPIRIT OF CARING AWARD recognizes four individuals and one organization for their impact as caring leaders and how they benefit the community through their length and breadth of service. Ideal candidates exhibit unique kindness and caring for others in our community. There is one organization award.

SPIRIT-OF-THE-FUTURE AWARD

The future of our community lies within the enterprise and passion of our younger givers of time, talent and/or treasure. Nominate a person (40 or under) who exhibits unique kindness and caring for others in our community; a future leader who demonstrates the Spirit of Caring today.

2016 SPIRIT OF CARING ANNOUNCEMENTS

The 2016 award recipients will be announced at the Crusader Community Health's Annual Evening of Caring on Friday, October 21, 2016 at Giovanni's. Join us for a festive evening of great food, inspiring stories and heart-warming community spirit.



2015 SPIRIT OF CARING RECIPIENTS

(l to r) Roger Greenlaw, MD, Jessica Rielly (Spirit-of-the-Future), Kathleen Kelly, MD, and Karen Brown; Organization Recipient: Remedies

Special Thanks to our 2016 Sponsors

PRESENTING SPONSOR



Zenith Sponsor



Pinnacle Sponsor



Media Sponsors



2016 SPIRIT OF CARING NOMINATION FORM

IT'S EASY TO NOMINATE...BY MAIL, E-MAIL, FAX OR ONLINE!

CHECK ONE PLEASE:

- Spirit of Caring INDIVIDUAL
- Spirit of Caring ORGANIZATION
- Spirit-of-the-Future INDIVIDUAL

Complete this form along with your typed nomination narrative for the 4 criteria below (not to exceed two pages). Or visit www.crusaderhealth.org/socnomination for convenient on-line nominating. Define your nominee's exceptional SPIRIT OF CARING toward our community based on the following:

1. **What is your nominee's involvement in a specific effort(s), project(s) or organization(s)?**
2. **What is the impact of your nominee's caring effort(s) within the community?**
3. **What is the commitment of your nominee in caring for others? Use examples.**
4. **Substantiate the impact, depth and longevity of the commitment.**

NOMINEE'S NAME (PLEASE PRINT CLEARLY)

ADDRESS CITY STATE ZIP

HOME PHONE WORK PHONE E-MAIL

NOMINATOR'S NAME

ADDRESS CITY STATE ZIP

HOME PHONE WORK PHONE E-MAIL

FORMS DUE BY: FRIDAY, SEPTEMBER 7, 2016

Mail, E-mail or FAX to:
SPIRIT OF CARING AWARDS
 Crusader Community Health
 1200 West State Street
 Rockford, Illinois 61102
 FAX: (815)490-1823
 E-mail: ksmith@crusaderhealth.org

To nominate on-line visit:
crusaderhealth.org

For questions about nominations, dinner tickets or other information about this special community event, telephone (815) 490-1620 during business hours or visit: www.crusaderhealth.org

