

Criteria Hospital Librarian of the Year

Nominating Form

I. Criteria

The Hospital Librarian of the year award is presented to an individual who has made outstanding contributions to the field of hospital librarianship in the following areas:

- A. **Accomplishments in the field of hospital librarianship**
Overall distinction or leadership within a hospital library such as a leadership role on the job, in the Southern Chapter or other library organizations, grants, AHIP membership, or other awards.

- B. **Impact of work on the hospital library profession**
Special projects related to hospital librarianship such as setting up a free interlibrary loan network or consortia, items which benefited a number of libraries, advocate for hospital libraries, work developing with library standards, or any other comparable project.

- C. **Service to other hospital librarians or libraries**
Develop or implement innovative applications of technology or software for hospital libraries in various settings. This could be a digital library, PDAs etc. Other examples could be involvement in local, regional, or national professional library (medical and non-medical) organizations whose overall “effect” improves working conditions, services, and so forth at the hospital library level.

- D. **Visibility in the area of hospital librarianship**
Recognition of an individual’s works and/or efforts by their fellow library peers or local hospital colleagues, administration, and library patrons. Presents research, publishes, teaches, consults, or is a recognized expert in a specific area who willingly shares that expertise. Works or professional contributions that have a lasting effect on the profession should also be listed here.

CANDIDATE'S
NAME _____

PLEASE USE ADDITIONAL SHEETS IF NECESSARY

A. ACCOMPLISHMENTS:

B. IMPACT OF WORK:

C. SERVICE TO THE PROFESSION:

D. VISIBILITY AND RECOGNITION:

SUBMITTED BY: PHONE:
Email:

FAX:
Date: _____

Please **forward nominations before May 15**, via e-mail, which would make it easier to send documentation to the committee members; mail; or fax to:

brenda.wimberly@northside.com

OR

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http://www.scmla.org/docs/hospawa_ratingcriteria.doc