Maryland Higher Education Commission
Nurse Support Program II (NSP II)
217 E. Redwood St., 21st Floor
Baltimore, MD 21202
https://nursesupport.maryland.gov

Dr. Peg E. Daw Nurse Faculty Annual Recognition (NFAR) award

Nomination Form Postmarked by October 31st

Nominee Information

Date of Birth: _____ ☐ Male ☐ Female ☐ Non-binary

Last Name: _____ First Name: _____ MI: _____

Social Security Number: XXX-XX-_____ Previous/Maiden Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Nominee's Work Email: _____ Telephone #: _____

Race/Ethnicity: ☐ Caucasian ☐ African American ☐ Hispanic ☐ Asian ☐ Other: _____

Current Educational Background/Degree (check all that apply):

☐ PhD in Nursing ☐ DNP ☐ Ed.D ☐ Other PhD in: _____

☐ MSN ☐ MS-Nurse Education ☐ BSN ☐ Other MS in: _____

Years employed as a nurse educator: _____

Type of Recognition (choose one)

- ☐ Excellence in Teaching
- ☐ Impact on Students
- ☐ Engagement in the Nursing Program and Employing Institution
- ☐ Innovation in Education and Technology
- ☐ Contributions to Nursing Education
- ☐ Fostering Diversity

Attach a copy of:

- ☐ Professional Curriculum Vitae
- ☐ Letter from the nominating Dean or Director describing the qualities and activities, awards or other demonstration of excellence in a specific category for recognition

Prior NSP II awards: ☐ NNFF ☐ NEDG ☐ NFAR ☐ GNF/Cohen Scholars

Nominating Program Information

Nominating Institution: _____

Nominating Dean/Director/Department Head – Nursing Program: _____

Dean/Director/Department Head Email: _____ Telephone #: _____

_____ _____

Signature of Dean/Director of Nursing Program Date