

# Nomination Form

# Annual HERO Awards



ALASD is seeking Nominees\* for the **Annual ALASD HERO Awards**, which will honor the outstanding staff member in assisted living residences statewide. We will select one award recipient from each Region.

Winners receive free registration to ALASD Fall Conference & Trade Show where they will be presented with their awards at the Awards Lunch. Winners also receive a plaque and publicity in our newsletter as well as other publications and the media.

## NOMINEE

First Name ..... Last Name .....  
Nominee's Title ..... Length of Service .....  
Brief Description of Position .....  
Organization ..... Type of Organization .....

**Name of Person Nominating** .....  
Title .....  
Email ..... Telephone .....

Please describe your reasons for nominating this employee, limiting comments to 100 words or less. Please be specific as possible.

## Selection Criteria

Nominee\* exhibits exemplary characteristics of **at least three aspects** of the ALFA philosophy:

- ✓ Offering cost-effective quality care that is personalized for the individual's needs
- ✓ Fostering independence for each resident
- ✓ Treating each resident with dignity and respect in care planning and implementation
- ✓ Promoting the individuality of each resident
- ✓ Allowing each resident choice of care & lifestyle
- ✓ Protecting each residents right to privacy
- ✓ Nurturing the spirit of each resident
- ✓ Inviting family and friends, when appropriate
- ✓ Providing a safe, residential environment
- ✓ Making the assisted living residence a valuable community asset

\* MUST be employed at an organization that is a member of ALASD.



Thank you for participating in the recognition of exemplary Assisted Living staff. Please return form by September 30th to:

Brandy Fiala, ALASD  
FAX: (605) 679-4605 or  
PO Box 818  
Yankton, SD 57078  
EMAIL: info@alasd.org