

Our 7 Principles of Behavior

Principles of Behavior Awards - Nomination Form



Date: _____

Nominee: _____ Department: _____

Written By: _____

1. Please select **one** award category from the list below:

- Behind the Scenes
- Collaboration
- Co-Workers Choice
- Quality
- Volunteer

2. Person being recognized for (please check all that applies):

<p>CRMC Principles of Behavior</p> <ul style="list-style-type: none"><input type="checkbox"/> Creating positive first impressions<input type="checkbox"/> Dignity and respect<input type="checkbox"/> Communicating compassionately and effectively<input type="checkbox"/> Acknowledging and amending<input type="checkbox"/> Maintaining a safe environment<input type="checkbox"/> Protecting confidentiality and privacy<input type="checkbox"/> Using key words at key times	<p>Dignity Health Values</p> <ul style="list-style-type: none"><input type="checkbox"/> <i>Dignity</i> - Respecting the inherent value and worth of each person.<input type="checkbox"/> <i>Collaboration</i> - Working together with people who support common values and vision to achieve shared goals.<input type="checkbox"/> <i>Justice</i> - Advocating for social change and acting in ways that promote respect for all persons and demonstrate compassion for our sisters and brothers who are powerless.<input type="checkbox"/> <i>Stewardship</i> - Cultivating the resources entrusted to us to promote healing and wholeness.<input type="checkbox"/> <i>Excellence</i> - Exceeding expectations through teamwork and innovation.
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3. Tell us the story – Please describe the reason for nominating this individual to be recognized for contributions to enhance our PoB and thus our Dignity Health values. Please be specific, including projects, stories or personal experiences that demonstrate the Nominee’s contributions.
