

# The Bumble-BEE Award Nomination Form



Name of the employee you're nominating.

Where does the employee work at YRMC or what do they do? (e.g., Admitting and Registration, cafeteria employee, social worker)

Please describe a situation or share a story that demonstrates how this person made a difference in your time at YRMC.

**Your information** (We'll contact you if your nominee receives the Bumble-BEE Award so you can join the celebration.)

Your Name

Phone (            )

Email

I am a (please check the one that best describes you):

- Nurse    Patient    Family/visitor    Physician    YRMC employee  
 Volunteer    Community member    Other

Please email this nomination form to [YRMCdaisyBee@commonspirit.org](mailto:YRMCdaisyBee@commonspirit.org)  
or print and mail to: YRMC Nursing Administration DAISY-BEE Awards  
1003 Willow Creek Road, Prescott, Arizona 86301

**Thank you for nominating an extraordinary YRMC employee for the Bumble-BEE Award!**