Nomination Application for Program-of-the-Year - Page 1 of 1

Program Exemplifying Excellence

Program Nomination:

Bureau Name: _____

Unit or Program (if other than the Bureau itself)**:**

_____

Address: _____

Phone: _____

Nominated by:

Name: _____

Payroll Title: _____

Program: _____

Phone: _____

(Attach additional page if needed.)

Describe the qualities of the program that exemplify qualities of excellence.

Describe 2 or 3 aspects about the program, e.g. specific services, team work, special support work for DMH, that demonstrate excellence