Nomination Form for the 2014 Amy Lodolce Mentorship Award

Your name(s) (More than one person may nominate):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Person you are nominating:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. In what capacity have you worked with this individual?
2. In what ways do you see this individual working to advance the profession of pharmacy?
3. Please provide some examples of ways in which this person is an outstanding role model, mentor or preceptor.
4. Please provide some examples in which this person has demonstrated a service to community (outside of job responsibilities).
5. How has this individual impacted your career?