



Lifetime Achievement Award Application Form

Your Name: _____

Title: _____

Organization: _____

Address: _____

City, State, Zip: _____

Phone, Fax: _____

Email: _____

Name of Nominee: _____

Title: _____

Organization: _____

Address: _____

City, State, Zip: _____

Phone, Fax: _____

Email: _____

Application Date: _____



Lifetime Achievement Award Supporting Documents

Along with this application, please submit a single document (*up to two pages in length*) that contains the following information:

Part 1: A description of the nominee's history within the healthcare IT industry and their contributions to the CHIME Foundation.

Part 2: A listing of the specific, quantifiable achievements exhibited by the nominee in relation to the healthcare IT industry.

Part 3: A description of this nominee's impact on your organization.

Part 4: A listing of any of the nominee's known/notable accomplishments that have been recognized either on a local, national, and/or global level.

Application Letters of Recommendation

A written letter of recommendation from the applicant's CEO or Board of Trustees must also accompany this application form.

All application materials should be emailed in pdf format to: kcleary@cio-chime.org