

Kittitas County Public Health

WASHINGTON

The Second Annual Kittitas County Public Health Champion Award is sponsored by the Kittitas County Board of Health Advisory Committee (BOHAC). The award is intended to honor and recognize individuals, groups, or organizations that have made significant contributions to the health of Kittitas County. BOHAC recognizes the importance of community in health. A healthy community requires contributions from many individuals and organizations.

What is the Public Health Champion Award? The award will be from \$500-1000 and is to be used by the recipient for current, ongoing, or future projects that contribute to the health of Kittitas County.

Who can be nominated? Any individual, group, or organization that has made significant contributions to the health of Kittitas County and Kittitas County residents. Kittitas County Public Health Department staff, Kittitas County Board of Health members, or Board of Health Advisory Committee members are not eligible to be nominated.

Who can submit a nomination? Anyone. Individuals, groups, or organizations may self-nominate.

What is the process? Nominations for the 2016 award are due March 18, 2016. Recipient will be notified by April 15, 2016. Please send nominations to Kittitas County Public Health Department, 507 N. Nanum St, Suite #102, Ellensburg, WA 98926; publichealth@co.kittitas.wa.us; or fax to 509-962-7581.

A report describing how the funds were utilized is due to the Board of Health Advisory Committee no later than one year from the date the award was presented.

BOHAC is a 501c3 whose mission is to provide feedback, formal recommendations, and public participation in public health activities, policies, funding, initiatives, and emergent needs for the Kittitas County Board of health and the Kittitas County Public Health Department. If you are interested in donating to the Annual Kittitas County Public Health Champion Award fund, please contact Bob Davis, BOHAC Treasurer, at drdavis44@gmail.com.



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Kittitas County Public Health Champion Award Nomination

Person filling out this nomination

First name: _____ Last name: _____
Email: _____ Phone number: _____

Nominee

Individual, Group or Organization: _____
Primary Contact Person for groups or organizations: _____

Mailing address

Street: _____
City: _____ Zip: _____
Email: _____ Phone: _____

Please describe how this individual or group contributes significantly to the health of Kittitas County? (500 word limit)

