Nomination Form

Starbridge All Stars recognizes employees who take initiative, live the Starbridge values, and make a difference.

Your Name __________________________ Phone __________________________

Date of Nomination __________________________ Email __________________________

Type of Nomination (check one only)

☐ Individual Name ________________________________________________________

☐ Team Name ____________________________________________________________

Location of individual or team (if known) ________________________________

Your connection to this individual or team (example: coworker) _______________

Starbridge Values

Respect

❖ Initiates and takes responsibility for professional interactions. Effective listener.

Innovation

❖ Continuously meets the changing needs of customers / families / organization

Diversity and Inclusion

❖ Demonstrates respect for differing points of view. Embraces opportunities to enhance understanding and appreciation of differences.

Partnership and Opportunity

❖ Participates as an effective member of the team sharing knowledge, skills, experiences (with customers / families / within the organization)

Tell Us Why You Are Nominating this Individual or Team

On page 2, please give specific examples of how this person or team takes initiative, lives the Starbridge values, and makes a difference. This section is required. You may attach additional pages as needed.

All Starbridge employees, with the exception of the leadership team, are eligible to be nominated. Please return to: recognition mail folder at any of our locations (in sealed envelope) or email recognition@starbridgeinc.org
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