

MSW INTERN of the YEAR 2024

Nomination Form

Nominee Name: _____ **Phone:** _____

Zone/School Assigned/University: _____

Email (work/school): _____

Briefly highlight the nominee's outstanding performance as an intern in the social work field.

How has the Intern shown outstanding collaboration with colleagues? How has the Intern shown professionalism?

Has the Intern been a self-starter and taken initiative to work -over and above- what you have assigned them to complete? Describe?

Has the Intern demonstrated influences of organizational policies and/or impacts on social policies? Describe detailed impact on the social work profession?

How has the Intern shown outstanding direct service to children and families? Describe their impact to students/families?

How has the Intern shown their involvement in department initiatives: Holiday events (Toy Drive/Harvest Drive), BCSSWA, other committees or initiatives?

Submitted by/Name: _____ **Title:** _____ **Date:** _____

Work Location/School Name: _____ **Work/cell Phone:** _____

For nomination to be considered, all requested information must be included. The nominee and the person submitting the nomination must be BCSSWA members.

Deadline for nominations: Friday, February 9, 2024. Return nomination via email to browardcountyswa@gmail.com. Late nominations will NOT be accepted.