

Options
Team of the Month Nomination Form
Return by the first day of the month.

Please use this form to nominate staff for "Team of the Month." Forms are due at the beginning of each month.
Winners will receive a free gift as available.

Characteristics to consider when nominating a team include:

- Significant progress toward a customer's goals
- Statistical performance area e.g., turnover, incident reports, utilization
- Supporting customer through a life circumstance
- Innovative strategies for positive outcomes

Nominee Information

Name of Team	Date
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Address of Team	Date
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Team Home Phone	Work Phone

Describe the reason you feel the above team should receive the award. Discuss contributions and special characteristics. ADDRESS criteria for award for which the individual is nominated. Attach extra sheets of paper if necessary.

Nominated by (Name and Organization)

Signature (Nomination forms without signatures will not be counted)	Title
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Address	Daytime Phone

Return to the Receptionist at Options.
PO Box 1732, Bloomington, IN 47402, or fax to 812.332.1186

Please return by the beginning of each month. Forms received after the first will be counted towards the next month. "Team of the Month" will be determined by the Leadership Team based on nomination forms. For additional information, please contact Susan Rinne 800.875.9615. Feel free to copy this form and distribute to others.