

Stakeholder Award Nomination Request

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Title]

[Recipient's Organization]

[Recipient's Address]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to formally request your nomination for the upcoming Stakeholder Award for [specific category] in recognition of outstanding contributions to healthcare.

[Healthcare Professional's Name] has demonstrated exceptional dedication and professionalism in their role as [insert position/title] at [organization]. Their commitment to [specific contributions or initiatives] has made a substantial impact on our community and the healthcare field.

We believe that [Healthcare Professional's Name] embodies the values of excellence, innovation, and compassion that this award seeks to honor. Their work has not only improved patient outcomes but has also inspired peers and colleagues to elevate their own standards of care.

We kindly ask you to consider nominating [Healthcare Professional's Name] for the Stakeholder Award. The nomination deadline is [insert deadline], and further information on the nomination process can be found at [insert website or contact information].

Thank you for your time and consideration. Please feel free to contact me at [your phone number] or [your email] if you have any questions or require additional information.

Sincerely,

[Your Name]

[Your Title]

[Your Organization]

[Your Address]