

**NYCRA Distinguished Member Nomination**

NYCRA recognizes that many of our members have made outstanding contributions to the Cancer Registry field, whether it be nationally or closer to home. We would like to honor these members with Distinguished Member recognition to be given at the Annual Educational Conference. This recognition will be given based on peer nominations. Please be as detailed as possible as this may be all the information we receive regarding this individual to make a decision. We have utilized NCRA requirements as a general reference to develop this nomination process.

Eligibility for this recognition should include at least the following:

* The candidate should have made a contribution to the cancer registry profession by participating in the New York Cancer Registrar’s Association
* Outstanding achievement in professional practice; for example, development or refinement of professional theory or techniques; or being a recognized resource contact in this field
* Leadership with contributions through education, research, publishing, presenter at any local, state or national conference
* Other specific contributions you may feel pertinent to enhancing or improving cancer registry principles or practices

To nominate someone, you must complete the attached nomination form. You will also need to provide a narrative statement explaining why you feel this person should receive NYCRA Distinguished Member recognition. Criteria demonstrated by the individual should be clearly stated. Include any testimonials or anecdotes you feel add to the decision-making review. Please note that nominees must be NYCRA members in good standing to be considered for recognition. Nominees need not be present at the educational conference to be recognized; however they will be notified of being selected prior to the meeting and encouraged to attend.

All nomination forms and narrative summary must be received no later than August 1, 2025.

Presentation will be made at the annual business meeting.

**NYCRA Distinguished Member Nomination Form**

Name & Credential(s):

Employer & Title:

Address (home or work):

Best Contact Phone #:

Cell:

Work:

Email:

***+++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++***

Nomination Submitted By:

Best Contact Phone #:

Cell:

Work:

Email:

Please send this completed form and narrative statement to:

Alesia Desgrosiellier, RHIT, ODS-C

15 Birch Lane

Halfmoon, NY 12065

Or email to:

alespin1vi@yahoo.com

***+++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++***

Was the individual notified of the nomination? YES NO

Will the individual attend the conference? YES NO