**A picture containing scissors

Description generated with high confidence**

**Missouri Hospice & Palliative Care Association**

**Heart of Hospice – Lifetime Achievement Award**

**What is the Award?** The MHPCA Heart of Hospice Lifetime Achievement Award is designed to honor a person affiliated with **MHPCA Member Hospice** who over the course of ***many* years** has given above and beyond the call of duty, giving of him/herself; thus, enhancing the quality of life for Hospice patients. Please be sure to elaborate the areas where your nomination has contributed to End-of-Life Care.

**Who qualifies for this award?** The awards may be presented to a Hospice employee and/or Hospice volunteer. MHPCA members may nominate **only one** person for this category. **This award may not be awarded if no qualified individuals are submitted for review.**

**Application process:** Nominations may be submitted by anyone wishing to offer a candidate for consideration.

**The application form must be completed and enclosed.**

**Both requirements must be included for the nomination to be reviewed.**

# **Biographical narrative:** Please describe the nominee’s activities that make him/her eligible for this award in the space provided. Please provide details not general comments.

* **Letters of Support:** Please provide at least one letter from a Hospice Team Member (other than person making the nomination) supporting the nomination or your application will not be considered. No more than three letters of support.

Mail completed application and materials to:

Missouri Hospice & Palliative Care Association

## P.O. Box 105318

## Jefferson City, MO 65110 or Email Jane at jmoore@missourihospice.org

## **Deadline: January 31, 2025**

## Awards will be presented at the MHPCA Heart of Hospice Luncheon

March 12, 2025

12:00pm-3pm

Heart of Hospice – Lifetime Achievement Award

|  |  |  |  |
| --- | --- | --- | --- |
| Hospice Award: | | | |
| Name of Nominee: | | Your Name: | |
| Address: | | Address: | |
|  | | Email | |
| Phone: | Fax: | Phone: | Fax: |
| Hospice Affiliation: | | Hospice Affiliation: | |

|  |
| --- |
| Biographical Narrative: |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

|  |
| --- |
| Please list “Letters of Support” and other enclosures: |
|  |
|  |

## **Deadline: January 31, 2025**

Awards will be presented at the MHPCA Heart of Hospice Awards Luncheon

Jefferson City, Missouri

March 12, 2025

12:00pm-3pm

