



National Association of Activity Professionals
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NAAP Awards Recommendation Form

Activity Professional of the Year

Please respond to **all** of the following on a separate sheet(s) of paper in a **typed** format. Include the statements/questions at the beginning of your response. You **must** follow this format to be eligible. **DO NOT include any identifying information on this form, e.g., name, facility, state, association name(s), etc. (Points will be deducted in scoring)**

1. Number of years as a NAAP member _____.
2. List and describe the individual's contributions to NAAP, support of NAAP on Committee(s) or as a volunteer.
3. Number of years in the Activity Profession _____.
4. List and describe the individual's job experience and any special skills he or she possesses.
5. List any certifications, e.g., Activity Professional/Activity Consultant – Board Certified (AP-BC or AC-BC) from NAAPCC, Activity Director Certified (ADC) from NCCAP, Registered Music Therapist (RMT), etc. (**NOT** certificates of participation or attendance) and other education relevant to the Activity Profession.
6. List other awards received or special recognition received throughout the individual's career.
7. List the highest level of formal education the individual has attained _____.
8. List and describe the individual's professional memberships and his or her involvement/contributions to Activity Professional Associations, including office(s) or committee position(s) held.
9. List and describe the individual's outstanding accomplishments in the Activity Profession.
10. Describe the individual's involvement in providing in-services and/or workshops.
11. Describe how the individual improves/promotes the Activity Profession, e.g., public speaking; public relations within the facility and community; and involvement in Activity Associations.
12. Describe the individual's involvement in Quality Assurance/Improvement projects and other ways to improve his or her facility's activity program.
13. In your own words, describe why you feel the individual stands out and is deserving of this award.
14. List and describe the individual's creativity as an Activity Director.
15. List and describe any special projects the individual has overseen, which enhance the activity department's program.

Please sign and date this form giving your permission to make copies of all documents for the NAAP Awards Committee to review. Attach this form to the front of the document being submitted.

Signature: _____ Date: _____