

Valley Preferred

SPIRIT OF COURAGE

Presented by
**BURN PREVENTION
NETWORK**

NOMINATE A HERO

SPIRIT OF COURAGE AWARD

Awarded to individuals or groups in Pennsylvania that have performed exceptionally courageous acts to save someone from death or serious injury from any fire source. Civilians and first responders may receive this award. The rescue attempt must have involved a significant degree of personal risk – exposure to either death or severe injury.

PARTNERS IN PREVENTION AWARD

Awarded to individuals, groups or organizations that have done an outstanding job educating community members about fire safety and burn prevention. Special consideration given for reaching large numbers of target populations or for service over an extended period.

Award winners will be honored at the annual Valley Preferred Spirit of Courage Award Celebration. Proceeds from this program will benefit the Burn Prevention Network and Lehigh Valley Health Network Regional Burn Center. This event is sponsored by Valley Preferred, a provider-led, preferred provider organization.



NOMINATE YOUR HERO

Complete form on reverse side. Visit burnprevention.org to view samples of previous award recipients.

BENEFITING



REGIONAL BURN CENTER



A program of the Burn Prevention Network

Valley Preferred
**SPIRIT OF
COURAGE**

Send all nominations to:

Burn Prevention Network

6081 Hamilton Blvd., Suite 600-628
Allentown, PA 18106

PHONE: 484-224-2948

EMAIL: corissa@burnprevention.org

WEBSITE: burnprevention.org

**NOMINEE INFORMATION (if part of a group,
please complete a separate form for each
person being nominated):**

NOMINEE NAME

ORGANIZATION/AFFILIATION

HOME ADDRESS

CITY/STATE/ZIP

CELLPHONE

HOME EMAIL

NOMINATOR INFORMATION:

Type of Nominator Organization Individual

NAME OF ORGANIZATION OR INDIVIDUAL

NAME OF REPRESENTATIVE (IF NOMINATOR IS AN ORGANIZATION)

ADDRESS

CITY/STATE/ZIP

PHONE

EMAIL

NAME OF NOMINEE'S SUPERVISOR OR ASSOCIATE

PHONE

EMAIL

SPIRIT OF COURAGE AWARD PARTNERS IN
PREVENTION AWARD

NOMINATION DETAILS

Date of heroic act _____

OR

Period covered by educational services _____

Location of event _____

Names of person, people or group of people who
were impacted by this person's actions _____

Please attach a separate page and explain why you believe this person is deserving of the Spirit of Courage or Partners in Prevention award. Please provide as much detail as possible. The Spirit of Courage is awarded to an individual, so be specific about the person's role in the rescue and risks taken. Points to include:

- Specific actions the nominee took that affected other people's lives
- Risks to life or safety the nominee faced (for Spirit of Courage nominees)
- Impact of nominee's actions on others
- Possible outcome if the nominee had not acted
- How the nominee's actions embodied the spirit of the award for which they are nominated

ATTACHMENTS—IMPORTANT!

Please attach official reports, news articles, links and any additional information for the benefit of the award Selections Committee. Only one set of attachments is needed if this is a group nomination.

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