

Virginia Association of Activity Professionals

Administrator of the Year Award

The VAAP Administrator of the Year Award is presented annually to the administrator who has consistently given significant support to the advancement of therapeutic activities within a facility/agency of which a VAAP member is the activity professional and has significantly supported the VAAP member activity professional in their contribution to the health and therapeutic care to the residents of the facility/agency; supported their role in local, state and national associations; and continuing education endeavors and professionalism.

Name of Administrator Nominee: \_\_\_\_\_
Facility/Agency: \_\_\_\_\_
Facility/Agency Address: \_\_\_\_\_
City/State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_
Number of years Nominee has been an Administrator: \_\_\_\_\_
Type of Facility/Agency Nominee is administrators. (NF, ADC, RCF): \_\_\_\_\_

Please attach the following to this application:

- 1. 500 word essay on the following suggested topics:
a. Overall support for the activity program in your facility
b. Knows and responds to the resident's activity needs
c. Actively supports family and resident involvement in Activities
d. What kinds of activities has your Administrator participated in?
e. How do your residents benefit from the efforts of your Administrator?
f. Does your Administrator have any special skills, talents or has he/she provided any unique contributions which enhance your activity department?
g. Has your Administrator initiated any new programs or projects at your facility?
h. In what ways does your Administrator help facilitate special programs (trips, one-time events, supplies, equipment etc.)?
i. Is your Administrator involved in any civic or community groups that enable him/her to enhance the image of your facility or activity program?
2. Examples of support of VAAP member activity professional's involvement in professional associations, continuing education endeavors and professionalism
3. Letters from residents, families and activity staff

Nominated by:

Name: \_\_\_\_\_
Address: \_\_\_\_\_
City/State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

Nominations for the VAAP Administrator of the Year Award may be made by an individual VAAP member, VAAP Board, or a local or state activity association. A VAAP member must be the activity professional in the facility/agency.

Send all applications to:

Jocelyn Jackson, Awards Chair
Tall Oaks at Reston
12052 North Shore Drive
Reston, VA 20190

\* All applications must be postmarked by February 25, 2009

FOR OFFICE USE ONLY

Date Received: \_\_\_\_\_
Number of Pages Received: \_\_\_\_\_
Authorized Signature: \_\_\_\_\_