

**RCN Award of Merit 2026**

Nomination form

**Section 1: Details of the nominee**

Name:

Address:

Telephone:

Email address:

RCN membership number:

Nominee’s current post:

Professional qualifications and/or awards and honours (including scholarships):

RCN offices held (if applicable):

**Section 2: Details of nominator**

Name:

Address:

Telephone:

Email address:

RCN membership number:

Nominator’s current post:

In what capacity do you know the nominee:

**Section 3: Details of supporters**

**Supporter 1**

Name:

Position:

Telephone:

Email address:

**Supporter 2**

Name:

Position:

Telephone:

Email address:

**Supporter 3**

Name:

Position:

Telephone:

Email address:

**Section 4: Testimonials**

The nominator and three supporters should each submit a testimonial about the nominee and why they should receive the RCN Award of Merit. These should demonstrate how the nominee has made an exceptional contribution to the RCN. You may expand upon the space given below as required.

**Nominator testimonial:**

**Supporter 1 testimonial:**

**Supporter 2 testimonial:**

**Supporter 3 testimonial:**

**Section 5: Declaration**

*I certify that, to the best of my knowledge, the nominee is of such professional and personal standing as to uphold the honour of the Award of Merit of the Royal College of Nursing of the United Kingdom.*

Signed (nominator):

Date:

**Submitting the nomination**

Please send this nomination form to awards@rcn.org.uk.

Make sure that you have included:

* this form, filled out in full and with a signed declaration
* testimonials from the nominator and three supporters

We will acknowledge that we have received your nomination within seven days. If you have not heard from us after that time, please contact awards@rcn.org.uk or **020 7647 3612** or **020 7647 3890**.

If you return the form by **Friday 17 October 2025,** the nomination will be considered in time for presentation at the RCN Awards 2026.

 **Consent for use of nomination**

I consent to the contents of my nomination being shared with the nominee, if the nomination is successful [ ]

I consent to the contents of my nomination being used in communications about the RCN Awards, if the nomination is successful [ ]

**Where did you hear about this award?**

Please mark all those relevant:

|  |  |  |  |
| --- | --- | --- | --- |
| RCN Magazine |  | RCN email |  |
| RCN event or conference |  | RCN website |  |
| Facebook |  | Regional communications |  |
| Twitter (X) |  | From an RCN representative |  |
| LinkedIn |  | From an RCN staff member |  |
| Other (please explain): |