

WSNA BEST COMMUNITY HEALTH PROJECT AWARD

Purpose: The purpose of this award is to recognize a school with the best community project aimed at raising awareness related to the community health topic chosen by WSNA.

Selection: The winner of this award will be determined by the WSNA Consultants (chaired by the WSNA Elected Consultant).

Recognition: The award will be presented to the recipient school at the WSNA Annual Convention.

Deadline: This report form and any attached sheets are due back at the registration table by the end of registration on Saturday of the WSNA Annual Convention.

School Name: _____

School Chapter President: _____

Number of Members: _____

Faculty Advisor Name: _____

Title of Project: _____

Date(s) of Project: _____

Site(s) of Project: _____

Number of NU Students Involved: _____

(IF NEEDED, PLEASE FEEL FREE TO ATTACH ANOTHER SHEET OF PAPER)

Goals of this Project:

(Over →→→)

WSNA BEST COMMUNITY HEALTH PROJECT AWARD

Describe how this project was planned and implemented:

Explain educational benefits to participating NU students:

Did participants receive class credit for participation: If yes, describe type of credit:

Community organizations that assisted with project (if applicable):
Describe how the project was advertised/publicized/promoted:

****Please attach any publicity or other materials used in the project: (photos, flyers, posters, handouts, press release, resources, etc.): ****