JAILCON20 SOUTHERN REGIONAL CONFERENCE

## JAILCON20 Southern Regional Corrections Professionals Awards

# AWARD APPLICATION

Please type or write legibly.
Only one application should be used per Award.

**Applications Deadline:** June 14, 2020 by 1700hrs

**RETURN APPLICATION BY 6/20/2019:**

Email to: online@jailtraining.org

**Or mail to:**

NIJO JAILCON20 Awards Committee
PO Box 1115
Midway, UT 84049

## AWARD CATEGORIES (check only one award per application)

| | |
|---|---|
| ○ | **Detention Facility Innovation Award**<br>Awarded to a detention facility which has demonstrated exceptional achievement in developing and/or enhancing a particular aspect or feature in the facility or in the operations of the facility in line with the mission of the Sheriff's Office during the past year. |
| ○ | **Detention "Rookie" of the Year Award**<br>Awarded to a Certified Detention Officer, without regard to years in service, who has exhibited professionalism and dedication to the Office and the community during the past year. |
| ○ | **Detention Supervisor of the Year Award**<br>Awarded to a Certified Detention Officer serving in a supervisory capacity (Corporal and/or Sergeant) who excel in their positions and are highly regarded by their staff for their consistent leadership, integrity, understanding and support, both professionally and personally, during the past year. |
| ○ | **Civilian Employee of the Year Award**<br>Awarded to a "non-certified" Detention employee serving in a support section of the Office who has who provided innovative ideas that enhanced the efficiency of the facility in line with the mission of the Office during the past year. |
| ○ | **Health Care Professional of the Year Award**<br>Awarded to the Detention Center medical staff member who set the bar for jail medical programs and best represents the overall spirit of professionalism, caring, and dedication. This award is submitted by peer nominations from medical or detention staff members. |
| ○ | **Detention Administrator of the Year Award**<br>Awarded to a detention administrator/commander who has shown exemplary leadership and has contributed to the improvement of the jail environment positively for enhanced safety, security, and custody to benefit overall jail operations, officers, staff, inmates, and the general public. |
| ○ | **Dedication to Excellence Award** *(aka Overworked & Underpaid Award)*<br>Awarded to a detention officer, supervisor, or administrator who in the past year has gone above and beyond normal expectations by working extra hours, making extra effort to ensure the safety and security of staff members, inmates, and the general public. |
| ○ | **Distinguished Valor Award**<br>Awarded to a detention officer, supervisor, or administrator who has put it all on the line, by either voluntarily risking his/her own personal safety to heroically serve and protect or who has made critical decisions or has taken preventive actions that ensured the safety and security of staff, inmates and the general public. |

NOMINATING PERSON / AGENCY INFO

| FULL NAME OF NOMINATING PERSON | TITLE/RANK | |
|---|---|---|
| | | |
| **AGENCY/ORGANIZATION** | | |
| | | |
| **ADDRESS** | | |
| | | |
| **CITY** | **STATE** | **ZIP** |
| | | |
| **EMAIL ADDRESS** | **PHONE** | |
| | | |

JAILCON 20
SOUTHERN REGIONAL CONFERENCE

| NOMINEE INFO | | | |
|---|---|---|---|
| | **NOMINEE'S FULL NAME**<br>(If nominating a facility, please provide the full name of the JA or Sheriff) | **TITLE/RANK** | **YEARS OF EXPERIENCE** |
| | | | |
| | **AGENCY/ORGANIZATION** | | |
| | | | |
| | **ADDRESS** | | |
| | | | |
| | **CITY** | **STATE** | **ZIP** |
| | | | |
| | **EMAIL ADDRESS** | **PHONE** | |
| | | | |

| **QUALIFICATIONS FOR AWARD** |
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| **LIST REASONS FOR THE NOMINATION ENDORSEMENT OF THE CANDIDATE FOR THIS AWARD**<br>(Given the limited space below, please attach any additional information with this application as needed.) |
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I certify that the above named candidate for the JAILCON20 Southern Regional Corrections Professionals Award is a full or part time employee performing duties within the specified agency.

_____ _____

Signature of Nominating Agency Executive Officer (Sheriff, etc.) Date