



UnityPoint Health – Cedar Rapids Ted Townsend/St. Luke's Auxiliary Award 2025 Official Nomination Form



*2024 Ted Townsend/St. Luke's
Auxiliary Award Recipient*

This Award was created by St. Luke's Auxiliary in 2018 to honor Ted Townsend and mark his contributions and accomplishments as President and CEO of St. Luke's Hospital. One of Mr. Townsend's greatest achievements was to build a culture of engagement among St. Luke's team members. This Award recognizes an outstanding UnityPoint Health – Cedar Rapids team member who embraces Mr. Townsend's spirit of transformational leadership.

Like Mr. Townsend, this team member creates valuable and positive change within the team, hospital, healthcare system or community. This leader directs others through innovation, initiative and compassion. By expecting the best from everyone and pursuing improved ways to work together, this team member helps to deliver the healthcare we'd like our loved ones to receive.

Award recipients receive financial support for academic courses, continuing education, educational conferences or professional certification.

Eligibility

A team member in good standing of UnityPoint Health – Cedar Rapids working at least 32 hours a pay period. Members of the UnityPoint Health – Cedar Rapids family who are eligible for this Award, include:

- Abbe Center
- Helen G. Nassif Transitional Care Center
- Jones Regional Medical Center
- MedLabs
- St. Luke's Hospital
- Surgery Center of Cedar Rapids
- UnityPoint Clinics
- UnityPoint Information Technology
- UnityPoint Outpatient Hospice & Home Care
- UnityPoint at Home – Medical Equipment

Timeline & Reminders

- **Completed Forms** – Submit hard copy or electronically (page 2) to Tonya Arnold, St. Luke's Foundation.
- **January 27, 2025** – Award nominations due
- **March 3, 2025** – Award application due
- **May 8, 2025** – Award ceremony

Questions regarding the application and selection process should be directed to:

Tonya Arnold

(319) 369-7572 • Tonya.Arnold@unitypoint.org



NOMINEE

Team Member's Name	Date Team Member Began Working in Current Role
Team Member's Title	Date Team Member Began Working for UnityPoint Health – Cedar Rapids
Team Member's Department	
Nominee works <input type="checkbox"/> FT <input type="checkbox"/> PT <input type="checkbox"/> PRN	If PRN, how many hours does nominee work a month?

NOMINATED BY

Name	Department
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REQUIRED! – TO BE COMPLETED BY NOMINEE'S MANAGER

Manager: Please double check that the nominee meets the eligibility requirements for this Award. *Please refer to page 1 for these requirements.*

Signature below indicates that Nominee has performed at "Exceptional Performer" or "Role Model" on their most recent annual performance review.

Manager/Supervisor Approving Signature	Date
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PLEASE ANSWER THE FOLLOWING QUESTION

In two or three sentences, please state how the nominee meets the award criteria.