

# Saskatchewan Association of Medical Imaging Managers

## Nomination for the Nestor Shinkewski Leadership Award

Date: \_\_\_\_\_

### Nominator

Name: \_\_\_\_\_  
Work  
Address: \_\_\_\_\_  
City / Town: \_\_\_\_\_ Province: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
e-mail: \_\_\_\_\_ Fax #: \_\_\_\_\_

### I would like to nominate (enter all the information that you know)

Name: \_\_\_\_\_  
Work  
Address: \_\_\_\_\_  
City / Town: \_\_\_\_\_ Province: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
e-mail: \_\_\_\_\_ Fax #: \_\_\_\_\_

Employer: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
City / Town: \_\_\_\_\_ Province: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
e-mail: \_\_\_\_\_ Fax #: \_\_\_\_\_

### I believe that the award is deserved because:

Please mail, fax or e-mail your nomination to:

***SAMIM Secretary***

Darrel Schneider RTR ACR

CT Scan Supervisor

Medical Imaging

Saskatoon City Hospital

701 Queen Street

Saskatoon, Sask S7K 0M7

(306) 655-8811

[darrel.schneider@saskatoonhealthregion.ca](mailto:darrel.schneider@saskatoonhealthregion.ca)