



2022 Immunization Champion Award Program

The Association of Immunization Managers (AIM) is a nonprofit member organization that uplifts and supports the voices of leaders of state, local, and territorial immunization programs. AIM members direct the public health efforts designed to keep children and adults vaccinated and protected against disease. AIM's mission is to establish a nation free of vaccine-preventable diseases.

This year, 2022 will mark the inaugural reinstatement of the previously titled *CDC Childhood Immunization Champion Award*. Now hosted by AIM, the newly expanded and streamlined *Immunization Champion Award* will honor up to one *Champion* from each of the 50 U.S. states, eight U.S. territories and freely associated states, and the District of Columbia.

Award Criteria

The *Immunization Champion Award* recognizes individuals who are working at the local level. It honors those doing an exemplary job or going above and beyond to promote or foster adult and childhood immunizations in their communities. When nominating and selecting their *Champion*, state and territorial immunization programs should base their nominations on meeting one or more of the following criteria:

Leadership: The candidate is considered an authority on immunization in their community, medical system, or individual practice. Activities may include acting as a spokesperson, trainer, mentor, or educator.

Collaboration: The candidate has worked to build support for and increase immunization rates in adults and/or children. Activities may include establishing or strengthening partnerships, coalitions, committees, working groups, or others.

Innovation: The candidate has used creative or innovative strategies to promote immunization or address challenges to immunization in their practice, community, state, or region. Activities may include implementing new strategies and adapting existing strategies in new ways, such as reaching under-immunized populations.

Advocacy: The candidate is active in advancing policies and best practices to support immunization in adults and/or children in their community, state, or region. The candidate cannot be involved in advocacy activities related to funding for immunizations.

Immunization Champions may include coalition members, parents, health care professionals (e.g., physicians, nurses, physicians' assistants, nurse practitioners, medical assistants, etc.), community activists, and leaders.

Immunization program managers, county, state, and federal government employees paid by state or federal immunization funding, individuals who have been affiliated with and/or employed by pharmaceutical companies, and those who have

already received the award are not eligible to apply (see complete eligibility checklist on page 3).

Process

State and territorial immunization program managers will coordinate the nomination and review process.

Nominations will be accepted from all 50 U.S. states, eight U.S. territories and freely associated states, and the District of Columbia. Nomination forms should be submitted to the immunization programs of the state or territory in which the nominee resides. The suggested deadline is **June 27, 2022**. However, nominators should contact their immunization program to find out if they have a different deadline. Self-nominations are welcome.

The nomination form requires a photograph, resume, and a completed nomination narrative form found on page 4. These items will be used for the promotion of selected *Immunization Champions*. The packet includes an HHS consent waiver that must be printed, initialed, signed, and either emailed or mailed with the nomination packet. Additional optional supporting materials may be submitted, including program materials, publications, news clippings, and website screenshots.

Immunization program managers will convene a review team to evaluate all nominees for their state or territory and recommend one individual receive the award based on the criteria listed above. Each program manager will notify AIM of their recommendation by **July 8, 2022**. AIM will review and confirm the recommendations and issue the awards.

Award Presentation and Recognition:

- Awards will be announced on August 15, 2022, to celebrate National Immunization Awareness Month (NIAM).
- Each awardee will receive an Immunization Champion Award plaque.
- *Immunization Champions* and their accomplishments will be featured on the AIM and CDC vaccine websites and may be recognized by their state or territory program during NIAM

Learn more online at

<https://www.immunizationmanagers.org/championsaward>

1 NOTE: AIM may not confirm recommendation if the nominee does not meet award criteria and/or eligibility guidelines.

Please send nominations to the immunization program of the state or territory in which the nominee resides. The suggested deadline is June 27, 2022. However, immunization programs may have selected unique deadlines. Please contact the immunization program to confirm the deadline. Immunization program contact information can be found at the end of this application. Please submit a photo, resume, and the completed narrative and HHS consent waiver forms. The photo, responses to the narrative questions, and resume may be used for promotional purposes if the nominee is selected as an *Immunization Champion*.

NOMINEE INFORMATION

| | | |
|-------------------------------|---------------|----------|
| Nominee First and Last Name | | Title |
| Organization | | |
| Address | | |
| City | State | ZIP Code |
| Nominee Phone Number | Nominee Email | |
| Nominee Degree(s)/Credentials | | |

NOMINATOR INFORMATION

| | | |
|-------------------------------|-------|-----------------|
| Nominator First and Last Name | | Nominator Title |
| Organization | | |
| Phone Number | Email | |

AWARD SHIPPING INFORMATION

The award plaque can be shipped directly to the selected award recipient or another contact at the immunization program if the program would like to present the award personally. Please provide the contact's name and the address where the award should be shipped (deliveries cannot be made to P.O. Boxes).

| | | |
|---------------------|-------|----------|
| First and Last Name | | |
| Organization | | |
| Address | | |
| City | State | ZIP Code |
| Phone Number | | |



1) Immunization Champion Award Eligibility and Criteria Checklist

Eligibility Checklist

Each of the following statements must be true for this nominee to be considered eligible for the *Immunization Champion Award*:

- The nominee is not entitled to royalties or other compensation for a vaccine product or process patent.
- The nominee has not served as a paid litigation consultant or expert witness in litigation involving a vaccine manufacturer.
- The nominee is not a county, state, or federal government employee paid by state or federal immunization funding.
- The nominee has not been involved in introducing or passing legislation related to vaccine funding.
- The nominee has not already received the *CDC Childhood Immunization Champion Award*.

Each of the following statements must be true for this nominee since **January 1, 2020**:

- The nominee, their spouse, or any members of their immediate family (siblings and children) have not been employed by a vaccine manufacturer.
- The nominee has not held stock in a vaccine manufacturer.
- The nominee has not served in an advisory or consulting role (paid or unpaid) to a vaccine manufacturer.
- The nominee has not accepted and/or solicited funds from vaccine manufacturers.
- The nominee has not accepted honoraria or travel reimbursement with a funding source from a vaccine manufacturer for attendance at scientific meetings.

Award Criteria Checklist

An *Immunization Champion* is an individual doing an exemplary job or going above and beyond to promote or foster immunizations in their community.

Immunization Champions should meet one or more of the following criteria:

- Leadership:** The candidate is considered an authority on immunization in their community, medical system, or individual practice. Activities may include acting as a spokesperson, trainer, mentor, or educator.
- Collaboration:** The candidate has worked to build support for and increase immunization rates in adults and/or children. Activities may include establishing or strengthening partnerships, coalitions, committees, or working groups.
- Innovation:** The candidate has used creative or innovative strategies to promote immunization or address challenges to immunization in their practice, community, state, or region. Activities may include both new strategies and adapting existing strategies in new ways, such as reaching under-immunized populations.

- Advocacy:** The candidate is active in advancing policies and best practices to support immunization in adults and/or children in their community, state, or region. Activities may include providing legislative testimony or promoting, analyzing, or evaluating policies.

2. Nomination Narrative Form

Please provide concrete examples of how the nominee goes above and beyond to promote or foster immunizations in their community. **(Maximum 250 words)**

Please provide concrete examples of immunization activities that demonstrate how this nominee meets one or more of the award criteria listed on page 3. **(Maximum 250 words)**

Please describe the impact of this nominee's work. **(Maximum 250 words)**



Please describe any specific experiences that led the nominee to become a passionate *Champion* for immunization. **(Maximum 250 words)**



1) Nominee Photo

Please submit a clear color photo as a .png or .jpg.

2) Nominee Resume

Please submit a current resume for the nominee (as a .pdf or .doc file).

3) Instructions for Submitting the Nomination Materials

Step 1 Complete all fields in the nomination packet electronically (preferred) or in a hard copy.

Step 2 Complete the HHS consent waiver, found on the next page, by certifying each statement with initials and signing the completed form:

- Print out the HHS consent waiver.
- Have the nominee initial the line before each statement certifying that it is true.
- Have the nominee print their name and sign the document.
- Have a witness sign the document.
- Scan the waiver and email it to the program manager. You can find contact information for your immunization program beginning on page 7.

Step 3 Submit a clear color photo as a .png or .jpg.

Step 4 Submit the nominee's resume as a .pdf file.

Step 5 Send the completed nomination packet, HHS consent waiver, photo, and resume to your immunization program manager by **June 27, 2022**.

Program managers: Please submit the nomination packet, HHS consent waiver, photo, and resume of your selected *Immunization Champion* to champions@immunizationmanagers.org by **July 8, 2022**.

Please note that the Immunization Champion Award does not imply CDC endorsement of individuals' commercial activity.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION | ATLANTA, GA 30333
CDC/NCIRD CHILDHOOD IMMUNIZATION CHAMPIONS
CONSENT WAIVER

NOTE: Witness signature is required to complete this nomination, although the witness does not have to be a notary.

I hereby grant full permission to the Department of Health and Human Services, Association of Immunization managers (AIM) and the Centers for Disease Control and Prevention (CDC), to use, reproduce, publish, distribute, and exhibit my name, picture, portrait, likeness, voice, quote, or any written information regarding my experiences with vaccine-preventable diseases and/or immunization or any or all of them in or in connection with the production of still photographs, written materials or Internet/intranet/extranet posting, a television tape or film recording, soundtrack recording, motion picture film, in any manner for training, education, and other purposes. I understand that portrait shots and other pictures of me may be used in AIM and CDC's internal and external written materials, including the CDC Internet site.

Without limitation as to time, I hereby waive all rights for compensation in connection with the use of my name, picture, portrait, likeness, voice, quote, or any written information regarding my experiences with vaccine-preventable diseases and/or immunization or any or all of them, or in connection with said AIM and CDC internal and/or external written materials, or intranet/extranet/Internet posting, television tape or film recording, soundtrack recording, motion picture film, still photograph, in whole or in edited form and any use to which the same or any materials therein may be put, applied, or adapted by the United States Government and others in the health field.

I certify that each of the following statements is true:

Please initial on the line next to each statement:

- _____ I am not entitled to royalties or other compensation for a patent on a vaccine product or process.
- _____ I have not served as a paid litigation consultant or expert witness in litigation involving a vaccine manufacturer.
- _____ I am not a county, state, or federal government employee who is paid with immunization funding.
- _____ I have not already received the *CDC Childhood Immunization Champion Award*.

I certify that each of the following statements is true.

Please initial on the line next to each statement:

Since January 1, 2020

- _____ I, my spouse, or any members of my immediate family (siblings and children) have not been employed by a vaccine manufacturer.
- _____ I have not held stock in a vaccine manufacturer.
- _____ I have not served in an advisory or consulting role (paid or unpaid) to a vaccine manufacturer.
- _____ I have not been involved in introducing or passing legislation related to vaccine funding.
- _____ I have not accepted and/or solicited funds from vaccine manufacturers.
- _____ I have not accepted honoraria or travel reimbursement with a funding source from a vaccine manufacturer for attendance at scientific meetings.

PRINT NAME OF NOMINEE _____

ADDRESS _____

SIGNATURE _____ DATE _____

Witness

PROJECT NAME: *Immunization Champion Award*

TITLE _____

SIGNATURE _____ DATE _____

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