

Nebraska Medical Association Physician of the Year Award
(Must be an actively practicing NMA member)
DEADLINE: August 11, 2017

Nominator's Name _____

Address _____

Phone _____

Nominee's Name _____

Address _____

Phone _____

Please complete the following sections. Supporting information may be attached and will be considered by the Awards Selection Committee.

I. What contributions has this candidate made to his/her community?

A. Through or in his/her practice of medicine

B. To the community as a whole

2. List any civic and/or professional organizations the candidate participates in, including offices held, if known.

3. Why do you believe this person is the best candidate for the award?

Please return this completed form and any attachments to:
Carole Bates, Communications Director, Nebraska Medical Association, 233 South 13th Street, Suite 1200, Lincoln, NE 68508, Phone (402) 474-4472, Fax (402) 474-2198 or email to caroleb@nebmed.org by **August 11, 2017**.