The Centre for Family Medicine

NOMINATION FORM

REWARDS AND RECOGNITION 2010

Date: _____

Individual or Team Nominee: _____

Nominated by: _____

1. **Select one or more of the following categories as the basis of your nomination:**
   - Team Building
   - Research
   - Innovation
   - Patient Care
   - Education

2. **Please describe the reason for nomination.** Use an example if applicable. Explain how your nominee has gone above and beyond in the category/categories selected.

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3. **Please suggest some type of reward**

(Note: Rewards should be meaningful, as a means to recognize their contributions. Suggestions do not have to be specific, but should be something your nominee would enjoy, e.g. golf package, day at the spa, etc)

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All nomination forms must be completed and submitted to **Jenn Metzloff** by **September 3, 2010.**

Thanks for taking the time to nominate someone ☺