



2019 OUTSTANDING PROGRAM AWARD NOMINATION FORM

Nominee Information

Name of Chapter/Chapter Foundation: _____

Name of Program: _____

Short Program Description: _____

Should this program be selected, please list the names of the two representatives with their contact information who would be attending the 2019 AAFP Foundation Annual Recognition Dinner.

1. _____
2. _____

Nominator Information

Nominating Chapter/Chapter Foundation Executive: _____

Address: _____

Phone:
(office) _____

Please attach a typed letter explaining the reasons your nominee is deserving of this award. This letter must be signed by the Executive Director/Executive Vice President and the President of your Chapter/Chapter Foundation and must include the following information with specific examples. Judging for the award will be based on:

- a) Content
- b) Presentation
- c) Creativity
- d) Measurable Outcomes
- e) Relationship of the program/project to the mission of the AAFP Foundation

The American Academy of Family Physicians Foundation advances the values of Family Medicine through humanitarian, educational, and scientific philanthropy dedicated to improving health.

Please return this form and your nomination letter via email by April 15, 2019 to:

Rollie Brock
rbrock@aafp.org