## **HIVMA Clinical Educator Award Nomination Form**

* To nominate a colleague for an award, the primary nominator should complete questions 1 to 5 and the seconding nominator should complete questions 6 and 7.
* The secondary nominator may submit the form separately but be sure to include the award nominee and primary nominator information.
* Email the form with the award nominee’s curriculum vitae to: info@hivma.org.
* **All nomination materials are due no later than August 13 at 11:59 pm ET.**

**1. Award Nominee – Contact Information**

**Full name:**

**Title:**

**Institution:**

**City, State:**

**Email Address:**

**2. Primary Nominator - Contact Information**

**Full name:**

**Title:**

**Institution:**

**City, State:**

**Email address:**

**Relationship to Nominee:**

**3. Primary Nominator - Impact Contribution**

***Summarize how the nominee has demonstrated an impact outside their Institution or outreach to a group with unmet needs.* (Requested length: 250 words max)**

**4. Primary Nominator - Innovation Statement**

***Discuss the evidence of the nominee's originality and innovation in the area of clinical education and/or teaching whether inside or outside of an academic setting*. (Requested length: 250 words max)**

**5. Primary Nominator - Additional Support (Optional)**

***Please provide any additional information to support your nomination that was not addressed above*.**

**6. Seconding Nominator – Contact Information:**

**Full name:**

**Institution:**

**City, State:**

**Email address:**

**7. Seconding Nominator Statement:**

***Briefly summarize how the nominee has demonstrated an impact outside their institution or outreach to a group with unmet needs and evidence of the nominee's originality and innovation in the area of clinical education whether inside or outside of an academic setting.***