PRESIDENT’S AWARD FOR INTERPROFESSIONAL TEAMWORK

NOMINATION FORM

Recipients of this award will have recognized accomplishments in Interprofessional teamwork as demonstrated through a collaborative project across Schools that demonstrate Interprofessional Teamwork yielding positive outcomes for participants (students, patients, and/or community members) in educational, clinical, or research area at TTUHSCEP.

$2,000 award

Name of Nominee:___________________________________________________________

Telephone:____________________  E-mail address:___________________________________

Nominee’s School (check one):

_____ Graduate School of Biomedical Sciences
_____ Paul L. Foster School of Medicine
_____ Gayle Greve Hunt School of Nursing

Rank of Nominee (check one):

_____ Professor
_____ Associate Professor
_____ Assistant Professor

Number of years at present academic rank:__________

Number of years at TTUHSCEP:__________

Required material for nomination in order of presentation:

• Completed nomination form (this form)
• Cover letter from the School’s nominator or committee containing detailed highlights of the nature of the candidate’s exceptional contribution to the criteria for this award (not to exceed 2 pages)
• Nominee’s curriculum vitae