

## Dr. Thomas M. Bailey Memorial Award Nomination Form

The Dr. Thomas M. Bailey Memorial Award is awarded for excellence in leadership, care, consideration and kindness shown to all.

### NOMINATION INFORMATION

1. Only those members who are in good standing as of July 31<sup>st</sup> in the year of the next AGM are eligible to be nominated for this award.
2. Candidates may not nominate themselves – they must be nominated by a Division colleague who is also in good standing as of July 31<sup>st</sup> in the year of the next AGM.
3. The criteria to nominate is as follows:
  - Outstanding leadership in areas of advocacy, community service, and/or education;
  - A keen ability to build consensus across peers and organizations;
  - Excellence in family medicine through activities that go beyond direct patient care in areas such as contributions to the broader health field and/or communities at large; and
  - Kindness, compassion and excellence in their daily service
4. Along with this form, a 250-500 word description as to why this member is being nominated and how they meet the above criteria is required.
5. All nominations must be received by the Division office no later than 4:00pm on August 31<sup>st</sup>. Nominations may be sent by fax: 250.658.3304, by email: [info@sidfp.com](mailto:info@sidfp.com), or by mail: 203-4489 Viewmont Ave, Victoria BC V8Z 5K8.
6. The awards committee will review all nominations and select a recipient by the middle of September. The recipient will be invited to the AGM for the presentation of the award.

### NOMINATION

I, being a member of the South Island Division of Family Practice, hereby nominate

\_\_\_\_\_ for the Dr. Thomas M. Bailey Memorial Award.

\_\_\_\_\_  
Name of Nominator (please print)

\_\_\_\_\_  
Signature of Nominator

\_\_\_\_\_  
Date signed

**Why is this person being nominated?**

(250-500 words maximum)