



Tulane School of Medicine
FACULTY RECOGNITION AWARD NOMINATION FORM

*Please provide the following information; *required.*

2024 Deadline: January 29, 2024

Name of Award*:

Nominee's Name*:

Nominee's Email Address*:

Nominee's Department*:

Number of years Nominee has worked at Tulane School of Medicine:

Tulane School of Medicine's Mission:

"We improve human health and foster healthy communities through discovery and translation of the best science into clinical practice and education; to deliver the highest quality patient care and prepare the next generation of distinguished clinical and scientific leaders."

***Please download this nomination form and email it to
SOMawards@tulane.edu. by the January 29th deadline.***

***Supporting documentation, as noted below, can be submitted with the
nomination form, but no later than February 26, 2024.***

- * Nominee's CV**
- * Nominee's bio sketch (research nominees) or executive summary (Associate Professor or higher); maximum 2-pages**
- * Letter(s) of support/recommendation for Nominee: unless otherwise specified in award criteria, 1 letter per nominee is required; up to 3 will be accepted for review. These letters must include how the nominee meets the award criteria. Please review nomination criteria and required supporting material before submitting.**