



MISSISSIPPI ACADEMY OF FAMILY PHYSICIANS
HUMANITARIAN AWARD
NOMINATION FORM

Nominee Information

Name of Nominee(s): _____

Address: _____

City, State, Zip: _____

E-Mail: _____ Phone: _____

Nominator Information

Nominator Name: _____

Address: _____

Organization (if applicable) _____

City, State, Zip: _____

E-Mail: _____ Phone: _____

Please attach a letter explaining the reasons your nominee is deserving of this award. Judging for the award will be based on:

- Exhibits a commitment to the ideals of family medicine by striving to improve access and to fill gaps in the health care delivery system for underserved populations in Mississippi
- Advanced the health care status of the public through innovation
- Advanced the health care status of the public through medical education
- Shown an outstanding commitment to patients and communities in need, wherever located
- Demonstrates courageous leadership in addressing issues of social justice regarding access to health care and for training in health care professions

Please return this form, your nomination letters, letters of support and documentation, postmarked by June 10, 2017 to:

**Mississippi Academy of Family Physicians
755 Avignon Drive · Ridgeland, MS 39157
Madison, MS 39110
Phone: 601-853-3302 · Fax: 601-853-3002 · beth@msafp.org**

**Past Humanitarian Award Winner
Gilbert R. Mason, Sr., MD 2012**