



SOGC NOMINATION FORM

2006 International Women's Health Program Volunteer Recognition Award

The award recognizes and celebrates the outstanding commitment and excellence of an SOGC volunteer for the contribution of knowledge, expertise and experience to the International Women's Health Program's many initiatives in low resource settings.

I, fellow SOGC member, hereby nominate _____ as candidate for the IWHP Volunteer Recognition Award.

Nomination proposed by (Please write legibly or type):

Name: _____
Address: _____
Telephone: _____ Fax: _____
E-mail address: _____ Member ID number: _____

Candidate Information

Name: _____
Address: _____
Telephone: _____ Fax: _____

I, undersigned, declare being a member in rule empowered of nominating the above individual as candidate to the IWHP Volunteer Recognition Award.

Signature: _____ Date: _____
Month/Day/Year

Please provide, on a separate page or in a covering letter, a brief narrative (no more than 250 words) detailing how the nominee meets the established criteria for the specific award. The summary, whether written or typed, must accompany this form.

Nominee eligibility:

- Member of SOGC (all categories);
- Made significant contributions to international women's health;
- Contributed to the SOGC's International Women's Health Program projects.

Please return this duly completed form, including the summary, **no later than March 15, 2006** to the following address:

The Society of the Obstetricians and Gynaecology of Canada, Echo Drive, Ottawa ON K1S 5R7;
Tel.: 1 800 561-2416 or (613) 730-4192; Fax: (613)730-4314; E-mail: spaquette@sogc.com.

For more information on SOGC Awards, visit www.sogc.org

Note:

- Your nomination is considered confidential. To avoid possible disappointment, please do not advise nominee in any way of your action in his or her behalf.
- Awards cannot be awarded posthumously.