

USA Medical Alumni Association 2024 Award Nomination Form

Select all that apply for this nominee: Distinguished Service Award (non-alumni eligible)

Distinguished Medical Alumni Award

Medical Alumni Humanitarian Award

Nominee Information

Full Name of Nominee _____

Street Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Email _____

Is nominee a USA COM alumna/us? Yes No If yes, class of _____

Nominee's Occupation _____

Nominee's Employer _____

Nominator Information Check if self-nomination

Full Name _____

Street Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Email _____

Date Submitted _____ Signature _____

Relationship to Nominee

Select One: Self Colleague / Classmate Friend Other (describe below)

If you checked "other" as your relationship to nominee, please describe:

Why should this nominee be considered for this award? (May use a separate page to answer):

Additional supporting documents may accompany the completed nomination form.

Please send completed form with any additional materials in one email to: medalum@southalabama.edu

Nomination submission deadline: February 16, 2024.

For further information call the Office of Medical Alumni Relations at (251) 460-6805.