

**DR. JOSE P. RIZAL MEMORIAL AWARDS  
OFFICIAL NOMINATION FORM**

Pls. Accomplish in duplicate:

Original -Dr. JPRMA Organizing Committee  
Duplicate -Component Society File  
-Specialty Division, Specialty and  
Affiliate Society

To : The Organizing Committee of the Dr. Jose P. Rizal Memorial Awards

From : PMA Component Medical Society: \_\_\_\_\_

Date : \_\_\_\_\_

We respectfully endorse the nomination of \_\_\_\_\_, M.D.  
a resident of \_\_\_\_\_

The above nominee is a licensed physician and a member of the Philippine  
Medical Association with PRC Number \_\_\_\_\_ issued on \_\_\_\_\_  
and expiring on \_\_\_\_\_.

The nominee is an a member of good standing since \_\_\_\_\_  
and holds a PMA card number \_\_\_\_\_ which expires on \_\_\_\_\_.

Community Leadership

Clinical Practice

Government Service

Academe

Research

\_\_\_\_\_  
(Signature over printed name)  
President, PMA Component Medical Society

\_\_\_\_\_  
(Signature over printed name)  
President, Specialty Division, Specialty and Affiliate Society

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From :        *PMA Component Medical Society: \_\_\_\_\_*

Date :        \_\_\_\_\_

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*Community Leadership*

*Clinical Practice*

*Government Service*

*Academe*

*Research*

\_\_\_\_\_  
*(Signature over printed name)  
President, PMA Component Medical Society*

\_\_\_\_\_  
*(Signature over printed name)  
President, Specialty Division, Specialty and Affiliate Society*

**NOMINATION: BASIC CRITERIA**

1. Nominee must be a *FILIPINO CITIZEN*.
2. A *PHYSICIAN* duly licensed to practice Medicine in the Philippines.
3. An *ACTIVE MEMBER* of PMA
4. If nominated by any specialty, sub-specialty, affiliate society, or outside institution, a written endorsement from the local PMA Component Medical Society is a must.
5. Nominee has not been convicted of any crime involving moral turpitude.
6. Nominee has been in active medical practice for at least 2 years prior to the nomination

**CATEGORY CRITERIA & RATING GUIDE**

<b>1. COMMUNITY LEADERSHIP</b>	
Community, Socio-cultural and Religious Involvement	50%
Government service/ partnership	10%
Professional Practice, Experience and Training	10%
Academe Involvement	10%
Research and Scholarly Works	10%
Excellence in other fields of endeavor	<u>10%</u>
<b>Total</b>	<b>100%</b>
<b>2. GOVERNMENT SERVICE</b>	
Government Service, Experience and Training	50%
Community, Socio-cultural and Religious Involvement	10%
Professional practice, training, experience	10%
Academe Involvement	10%
Research and Scholarly Works	10%
Excellence in other fields of endeavor	<u>10%</u>
<b>Total</b>	<b>100%</b>
<b>3. OUTSTANDING IN CLINICAL PRACTICE</b>	
Clinical Practice, Experience and Training	50%
Research and Scholarly Works	10%
Community, Socio-cultural and Religious Involvement	10%
Government Service, partnership	10%
Academe Involvement	10%
Excellence in other fields of endeavor	<u>10%</u>
<b>Total</b>	<b>100%</b>

#### 4. ACADEME

<i>Academe Involvement</i>	50%
<i>Research and Scholarly Works</i>	10%
<i>Community, Socio-cultural and Religious Involvement</i>	10%
<i>Government service/partnership</i>	10%
<i>Professional Practice, Experience and Training</i>	10%
<i>Excellence in other fields of endeavor</i>	<u>10%</u>
<i>Total</i>	100%

#### 5. RESEARCH

<i>Research and Scholarly Works</i>	50%
<i>Academe Involvement</i>	10%
<i>Community, Socio-cultural and Religious Involvement</i>	10%
<i>Professional Practice, Experience and Training</i>	10%
<i>Government service/partnership</i>	10%
<i>Excellence in other fields of endeavor</i>	<u>10%</u>
<i>Total</i>	100%

### **PRIZES**

#### A. FIVE CATEGORY WINNERS

- *A Specially-designed Dr. Jose P. Rizal Memorial Awards Trophy*
- *A Specially-designed Dr. Jose P. Rizal Memorial Awards Medallion*
- *A cash prize of One Hundred Fifty Thousand Pesos (P150,000.00)*
- *P100,000.00 worth of Unilab Medicines to be donated to any charitable institution of choice by the Awardees.*

#### B. CATEGORY FINALISTS

- *A Specially-designed Dr. Jose P. Rizal Memorial Awards Medallion*
- *P50,000.00 worth of Unilab Medicines to be donated to any charitable institution of choice by the finalists.*

## **IMPORTANT INFORMATION**

1. *Program Mechanics and Nomination forms are available in any of the following offices:*
  - *PMA Secretariat*
  - *Component Medical Society Secretariat*
  - *Specialty Division, Specialty and Affiliate Secretariat*
  - *Unilab Professional Relations Management Division*
2. *Previous nominees who did not win can be nominated again*
3. *Winner of one category can be nominated to another category.*
4. ***Deadline for submission of nominations shall be on December 30, 2018, and addressed to the PMA Secretariat, North Avenue, Quezon City***
5. *Please submit 3 copies of your nomination form together with your supporting documents*
6. ***Screening of nomination forms and materials will be on January 2019 at the PMA Board Room.***
7. *Final judging will be done by a distinguished 15 - member panel of judges composed of health, religious, academe and civic leaders from the government and private sectors.*
8. *Awarding ceremony will be held during the 112nd PMA Annual Convention on May, 2019.*
9. *For more information, please contact any of the following:*
  - *PMA Secretariat - Tel # 929-6366 / 09178221357*
  - *Nilo M Alcoreza, M.D. - 09177949512*
  - *Professional Relations Management Division, United Laboratories, Inc.*

## **ATTACHMENTS**

*The following must be attached to the nomination form:*

1. *Latest/Updated Curriculum Vitae*
2. *Photocopies of:*
  - *Diploma , Graduate units, etc*
  - *Certificates / Diplomas of attendance in relevant seminars, symposia, workshops, etc.*
  - *Appointment papers*
  - *PTR, License to Practice*
  - *Professional Leadership Awards*
  - *Community services, projects, awards*
  - *Published articles and the pertinent Table of Contents of journal or any publication*
3. *Two (2) recent passport-size colored pictures*  
***NOTE: To facilitate the evaluation of documents, please arrange them properly according to the criteria. Please add extra pages if needed.***

***EXECUTIVE SUMMARY TO BE DONE BY THE NOMINATOR***

**CRITERIA FOR NOMINEE**

**1. PMA MEMBERSHIP**

A. PMA No. -----

B. PHILHEALTH No. -----

**II. EDUCATIONAL, ACADEMIC & PROFESSIONAL BACKGROUND  
(Including Specialty and /or Sub-specialty Training of Distinction)**

**A. SCHOLASTIC RECORD**

1. Academic Degree

a. Preparatory Medicine

Degree Earned -----

Institution/School Attended -----

Year -----

Honors/Distinction (if any) -----

b. Medicine Proper

Degree Earned -----

Institution/School Attended -----

Year -----

Honors/Distinction (if any) -----

c. Postgraduate Studies/Units

Degree Earned -----

Institution/School Attended -----

Year -----

2. Government Licensure Exams Taken

----- Year -----

----- Year -----

----- Year -----

3. Residency Training (if any)

Specialty -----

Institution/Hospital ----- Year -----

Year -----

Honors/Distinction (if any) -----

4. Diplomate Training/Examinations

----- Year -----

----- Year -----

5. Fellowship Training/Examinations

----- Year -----

----- Year -----

**B. Professorial/Teaching Experience**

School ----- Year -----

Highest Academic Rank Obtained -----

Recognition/awards -----

**c. Administrative Experience**

Institution/Organization ----- Position ----- Year -----

-----

**D. Professional Practice**

1. Private

<i>Institution/Organization</i>	<i>Position</i>	<i>Year</i>
-----	-----	-----
-----	-----	-----

2. Government – Certificates of Employment with dates of appointments.

NOTE: Please include PES rating for the last 5 years from the government

<i>Institution/Organization</i>	<i>Position</i>	<i>Year</i>
-----	-----	-----
-----	-----	-----

3. Awards or recognitions -----

**III. RESEARCH, CREATIVE WORK, PUBLICATIONS, PROFESSIONAL STANDING, RECOGNITION AND ACHIEVEMENTS**

**A. Publications**

1. Published journal articles/research works

A. International

<i>Journal/Publication</i>	<i>Title</i>	<i>Date</i>
-----	-----	-----

B. National

C. Local

2. Unpublished journal articles/research works

A. International

<i>Journal/Publication</i>	<i>Title</i>	<i>Date</i>
-----	-----	-----

B. National

C. Local

3. Published Books/Articles/Newsletters

A. Sole authorship/Editor

Year -----

B. Co-author/Assistant Editor

Year -----

C. Translator

Year -----

D. Reviser

Year -----

E. Reviewer

Year -----

4. Scientific or Technological Inventions/Contributions

A. International Significance/Application

Year -----

B. National Significance/Application

Year -----

C. Local Significance/Application

Year -----



D. *Patents Obtained*

1. *International application*  
 ----- Year -----

2. *National application*  
 ----- Year -----

E. *Documented Discoveries*  
 ----- Year -----

5. *Delivered/Published Papers/Lectures/Speeches*

A. *International*  
 ----- Year -----

B. *National*  
 ----- Year -----

C. *Local*  
 ----- Year -----

6. *Creative Endeavors/Production*

A. *Distinguished Performance (Drama, singing, dancing, oratorical, etc.)*  
 ----- Year -----

B. *Original Design*  
 ----- Year -----

C. *Published/Acknowledged Work of Art*  
 ----- Year -----

D. *Exhibited Art Works*

*One man*  
 ----- Year -----

*Group show*  
 ----- Year -----

7. *Affiliation/Membership in Professional Organizations*

a. *Officer*

	<i>Position</i>	<i>Year</i>
<i>International</i>	-----	-----
<i>National</i>	-----	-----
<i>Local</i>	-----	-----

b. *Member in good standing*

<i>International</i>	-----	-----
<i>National</i>	-----	-----
<i>Local</i>	-----	-----

c. *Professional Honors/Achievements/ Awards*

	<i>Awarding Institution</i>	<i>Awards ReceiveDate</i>
<i>International</i>	-----	-----
<i>National/Regional</i>	-----	-----

d. *Managerial Work*

a. *Government*

*Level*

*Position*

*Year*

*National*

-----

-----

*Regional*

-----

-----

*Local*

-----

-----

8. *Consultancy*

*Institution*

*Year*

-----

-----

A. *Guest Appearance in Medical Programs*

*Occasion*

*Year*

*International Coverage*

-----

-----

*National Coverage*

-----

-----

**IV. COMMUNITY AND EXTENSION SERVICES**

A. *Community Service*

1. *Organizer/Project Head*

*Year*

-----  
2. *Consultancy/Resource Person*

-----  
*Year*

-----  
3. *Participant*

-----

B. *Humanitarian/Relief Mission*

*Year*

-----

-----

C. *Extension Service*

1. *Seminars/Workshops/Conventions Attended/Participated*

A. *Organizer*

*Year*

*International Level*

-----

-----

*National Level*

-----

-----

*Local/Institution Level*

-----

-----

B. *Chairman of Working Committee*

*Year*

*International Level*

-----

-----

*National Level*

-----

-----

*Local/Institution Level*

-----

-----

C. *Speaker/Paper Presenter*

*Year*

*International Level*

-----

-----

*National Level*

-----

-----

*Local/Institution Level*

-----

-----

D. *Coordinator/Facilitator/Member, Working Committee*

*Year*

*International Level*

-----

-----

*National Level*

-----

-----

*Local/Institution Level*

-----

-----

*E. Reactor/Rapporteur/Panelist*

	<i>Year</i>
<i>International</i> _____	_____
<i>National level</i> _____	_____
<i>Local/institution level</i> _____	_____

*F. Community Projects implemented*

\_\_\_\_\_

\_\_\_\_\_

**V. OTHER QUALIFICATIONS**

- A. Languages/ Dialects Spoken* \_\_\_\_\_
- B. Cultural/Educational Travels* \_\_\_\_\_
- C. Excellence in Sports, etc.* \_\_\_\_\_
- D. Artistic, Cultural, Novelty and Exotic Collection* \_\_\_\_\_
- E. Religious/CIVIC Involvement/Participation* \_\_\_\_\_

*Dr. Jose P. Rizal came from an illustrious and distinguished Mercado, Rizal and Alonzo families.*

**A Personal and family background of the nominee is.**

*Nominee's Full Name* \_\_\_\_\_

*Residence Address* \_\_\_\_\_

*Telephone Number/s* \_\_\_\_\_

*Place of Birth* \_\_\_\_\_

*Date of Birth* \_\_\_\_\_

*Present Age* \_\_\_\_\_

*Citizenship* \_\_\_\_\_

*Civil Status* \_\_\_\_\_

*Spouse's Name* \_\_\_\_\_

*Father's Name* \_\_\_\_\_

*Mother's Name* \_\_\_\_\_

*Number of Children with Educational Attainment* \_\_\_\_\_

\_\_\_\_\_