MEMORANDUM CIRCULAR NO: 2021-12-01-032

TO: ALL PRESIDENTS OF COMPONENT, SPECIALTY DIVISIONS SUBSPECIALTY AND AFFILIATE SOCIETIES

SUBJECT: 31ST DR. JOSE P. RIZAL MEMORIAL AWARDS

DATE: DECEMBER 1, 2021

Greetings from the Philippine Medical Association!

The search is on for the 2022 Filipino Physicians of Distinction. The PMA is inviting all physicians to join the 31st Dr. Jose P. Rizal Memorial Awards.

For your guidance, enclosed herewith are the nomination forms and program mechanics.

Sincerely yours,

ANGELITO BENJAMIN C. BELEN, MD
Overall Chair, 31st Dr. Jose P. Rizal Memorial Awards
PMA Governor, Southern Tagalog

Noted by:

MA. REALIZA G. HENSON, MD
Secretary General

BENITO P. ATIENZA, MD
President
DR. JOSE P. RIZAL MEMORIAL AWARDS
OFFICIAL NOMINATION FORM

Pls. Accomplish in duplicate:

Original 
Duplicate 

- Dr. JPRMA Organizing Committee 
- 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 __________________________________________, MD
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 a member of good standing since__________ and holds a PMA number ____________________ .

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

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To               : The Organizing Committee of the Dr. Jose P. Rizal Memorial Awards
From              : PMA Component Medical Society: ________________________________
Date              : ____________________

We respectfully endorse the nomination of
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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 a member of good standing since__________
and holds a PMA number ________________.

☐ 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 five (5) years prior to the nomination

**CATEGORY CRITERIA & RATING GUIDE**

### 1. COMMUNITY LEADERSHIP

<table>
<thead>
<tr>
<th>Category</th>
<th>Weight</th>
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<tbody>
<tr>
<td>Community, Socio-cultural and Religious Involvement</td>
<td>50%</td>
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<tr>
<td>Government service/ partnership</td>
<td>10%</td>
</tr>
<tr>
<td>Professional Practice, Experience and Training</td>
<td>10%</td>
</tr>
<tr>
<td>Academe Involvement</td>
<td>10%</td>
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<tr>
<td>Research and Scholarly Works</td>
<td>10%</td>
</tr>
<tr>
<td>Excellence in other fields of endeavor</td>
<td>10%</td>
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<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
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### 2. GOVERNMENT SERVICE

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<th>Weight</th>
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<tr>
<td>Government Service, Experience and Training</td>
<td>50%</td>
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<tr>
<td>Community, Socio-cultural and Religious Involvement</td>
<td>10%</td>
</tr>
<tr>
<td>Professional practice, training, experience</td>
<td>10%</td>
</tr>
<tr>
<td>Academe Involvement</td>
<td>10%</td>
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<tr>
<td>Research and Scholarly Works</td>
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<td>Excellence in other fields of endeavor</td>
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### 3. OUTSTANDING IN CLINICAL PRACTICE

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<tr>
<th>Category</th>
<th>Weight</th>
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<tr>
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</tr>
<tr>
<td>Research and Scholarly Works</td>
<td>10%</td>
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<tr>
<td>Community, Socio-cultural and Religious Involvement</td>
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<tr>
<td>Government Service, partnership</td>
<td>10%</td>
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<tr>
<td>Academe Involvement</td>
<td>10%</td>
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<tr>
<td>Excellence in other fields of endeavor</td>
<td>10%</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
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### 4. ACADEME

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<th>Weight</th>
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<tr>
<td>Academe Involvement</td>
<td>50%</td>
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<tr>
<td>Research and Scholarly Works</td>
<td>10%</td>
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<tr>
<td>Community, Socio-cultural and Religious Involvement</td>
<td>10%</td>
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<tr>
<td>Government service/partnership</td>
<td>10%</td>
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<tr>
<td>Professional Practice, Experience and Training</td>
<td>10%</td>
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<tr>
<td>Excellence in other fields of endeavor</td>
<td>10%</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
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5. RESEARCH

<table>
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<tr>
<th>Category</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Research and Scholarly Works</td>
<td>50%</td>
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<tr>
<td>Academe Involvement</td>
<td>10%</td>
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<td>Community, Socio-cultural and Religious Involvement</td>
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<td>10%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
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For all categories an extra 5% point will be given to those who have active participation to stop the spread of COVID 19 Infection. 3 to 5 minute video documentation should be submitted to support for the extra 5% points.

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. (Half of this will go to the winner and the other half will be given to the Nominator or the Component Society.)

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
2. Previous nominees who did not win can be nominated again and should be endorsed by component society
3. Previous Dr. JPRMA winners are not eligible to be nominated in any category
4. **Deadline for submission of nominations shall be on January 31, 2022, and addressed to the PMA Secretariat, North Avenue, Quezon City**
5. Please submit 3 copies of your nomination form together with your supporting documents. Hard and soft copies of your documents.

6. Screening of nomination forms and materials will be on __________, 2022 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 last day of the 115th PMA Annual Convention on May 22, 2022.

9. Deadline for Claiming the Prizes is on December 2, 2022. All unclaimed prizes after December 2, 2022 will be forfeited and will be given to PMA Emergency and Disaster Committee.
   - For more information, please contact
   PMA Secretariat – Tel # 929-6366 / 09278717025

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
   - Tax Identification Number
   - A current certificate of good standing issued by the component society
   - List of UNILAB medicines (100K worth) be given to their charitable institution of choice, and to their component society/nominator (for finalists only)
   - Professional Leadership Awards
   - Community services, projects, awards
   - Published articles and the pertinent Table of Contents of journal or any publication
3. Two (2) recent 2x2 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

I. 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 Institution/Organization
   Position  Year
   ----------------------------------------

2. Government – Certificates of Employment with dates of appointments.
   NOTE: Please include PES rating for the last 5 years from the government Institution/Organization
   Position  Year
   ----------------------------------------

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

A. Publications

1. Published journal articles/research works
   A. International Journal/Publication
      Title  Date
      ----------------------------------------
   B. National
      ----------------------------------------
   C. Local
      ----------------------------------------

2. Unpublished journal articles/research works
   A. International Journal/Publication
      Title  Date
      ----------------------------------------
   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
   Position          Year
   International    ___________________     ___________________
   National         ___________________     ___________________
   Local            ___________________     ___________________

b. Member in good standing
   International    ___________________
   National         ___________________
   Local            ___________________

c. Professional Honors/Achievements/ Awards
   Awarding Institution  Awards Receive Date
   International        ___________________     ________     ________
   National/Regional    ___________________     ________     ________
d. Managerial Work  
a. Government Level  
Position  
National  
Regional  
Local  
Year  

8. Consultancy  
Institution  
Year  

A. Guest Appearance in Medical Programs  
Internationa Coverage  
National Coverage  
Occasion  
Year  

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  
International Level  
National Level  
Local/Institution Level  
Year  

B. Chairman of Working Committee  
International Level  
National Level  
Local/Institution Level  
Year  

C. Speaker/Paper Presenter  
International Level  
National Level  
Local/Institution Level  
Year  

D. Coordinator/Facilitator/Member, Working Committee  
International Level  
National Level  
Local/Institution Level  
Year
E. Reactor/Rapporteur/Panelist

<table>
<thead>
<tr>
<th>International</th>
<th>Year</th>
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<tr>
<td>National level</td>
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<tr>
<td>Local/institution level</td>
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F. Community Projects implemented

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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

TIN Number