

Service Award Nomination Form
Deadline for submission: October 30, 2025

The **Service Award** is given to individuals who have made a significant contribution to the practice of TB prevention and care. of TB. This award may be given annually. Recipients may include administrators, educators, and public health advisors, as well as nurses and physicians. Prior recipients are [listed here](#).

Information Regarding Nominee

Name of Nominee: _____

Title: _____

Institution/Agency: _____

Mailing address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Phone: _____

E-mail: _____

Reasons for nomination:

Is the individual aware of your nomination? Yes _____ No _____

It is not necessary for you to inform the individual to be eligible for the award.

Contact Information for Individual who is putting forward a Nominee

Name: _____

Title: _____

Institution/Agency: _____

Mailing address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Phone: _____

E-mail: _____

Please submit this form (by email, fax, or mail) with a current resume or CV of the nominee to:

Menn Biagtan, MD, MPH
NAR Secretariat
Email: biagtan@bclung.ca