**IFSSH PIONEER OF HAND SURGERY**

**NOMINATION SUMMARY**

**Nominee:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of birth (dd/mm/yyyy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Deceased: Y / N

Contact email address (or family member if deceased): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Nominating Society**

Name of society: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact person and society position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Submission checklist:**

1. We confirm that we have read the IFSSH Pioneer Nomination Guidelines **🖵**

2. We confirm that the nominee will be aged over 70 by 17th June 2019, or deceased **🖵**

3. We have enclosed:

* a letter of nomination from the society **🖵**
	+ detailing the reasons for nomination;
	+ confirming that the nominee satisfies the selection criteria; and
	+ including the names of three peers from the society which supports the nomination
* an abbreviated CV of three pages maximum **🖵**
* a photograph  **🖵**

The Society should forward this coversheet and the full nomination documents listed above to the Secretary-General (email: administration@ifssh.info).

**The closing date for nominations is 17th December 2018.**

**NO NOMINATIONS WILL BE ACCEPTED AFTER THIS DATE.**

NB: Nominations will be considered by the IFSSH Nominating Committee. The IFSSH will not undertake any correspondence with nominees during the submission or assessment period. The nominating society will be informed of the outcome. The IFSSH will communicate with those to be honoured prior to the congress with information regarding the awards ceremony.