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**PHILA AWARDS**

**Deadline for submission: 31 July 2023**

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| **EMERGING PRACTITIONER AWARD** | |
| Has this person agreed to be nominated?  Yes  No |  |

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| **PERSON NOMINATED** |

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| --- | --- |
| Full Name of person being nominated |  |
| Degree(s) |  |
| Title |  |
| Organisation |  |
| Physical or postal address |  |
| Telephone Number (s) |  |
| Email |  |

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| **NOMINATOR INFORMATION – NOMINATOR 1** |

|  |  |
| --- | --- |
| Full Name |  |
| Title |  |
| Organisation |  |
| Address |  |
| Telephone Number |  |
| Email |  |
| **Signature** | **Date** |

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| **NOMINATOR INFORMATION – NOMINATOR 2** |

|  |  |
| --- | --- |
| Full Name |  |
| Title |  |
| Organisation |  |
| Address |  |
| Telephone Number |  |
| Email |  |
| **Signature** | **Date** |

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| **THE PHILA EMERGING PRACTITIONER AWARD: CRITERIA** |
| Please confirm candidate’s date of birth*.*  *Please note for this award, candidates must be 35 years or younger.* |
| Please name and describe the work for which this person is being nominated. E.g. please give title of project, province/district where work was conducted, organization for which work was conducted (if relevant), the duration of the project etc.  *Please note: The work nominated must have been conducted in South Africa within the last 5 years.* |
| Does the nominee demonstrate enhanced and broadened public health practices that go beyond traditional public functions and programs?  **If yes, please describe.** |
| Has the work/initiative of nominee been translated (or in the process of being translated) into policy or practice?  **If yes, please describe.** |
| Is the nominee a leader to whom colleagues in the field look up to as a role model or do they demonstrate leadership potential?  **If yes, please describe.** |
| Kindly highlight any recognition in the field that the nominee’s work/initiative has received?  **If yes, please describe.** |
| Does the nominee demonstrate high standard of professionalism, ethics and values in the work/initiatives they carry out?  **Please describe.** |