



MASSACHUSETTS MEDICAL SOCIETY

Every physician matters, each patient counts.

COMMITTEE ON RECOGNITION AWARDS

Application for the Creation of a New MMS Award

Please complete the following application for the creation of a new award.

Proposed award name:

PROPOSED AWARD SPONSOR INFORMATION

Sponsor:

Sponsor email:

Sponsor phone:

Please provide a description and outline the significance of the award:

What is the purpose of the award?

What will be the award eligibility criteria (e.g., MMS members only, nonmembers, physicians only, etc.)?

What are the criteria/metrics for specific award (e.g., technical accomplishment, exemplary performance in their field, etc.)?

Describe how this award differs from existing awards:

Please view our existing awards at www.massmed.org/awards.

Describe the process and criteria (rubric) that will be used to evaluate nominees (two endorsement letters, committee review and selection, etc.):

Describe the potential pool of nominees:

Describe the recognition award (e.g., plaque, monetary, etc.):

Indicate the presentation venue (e.g., committee meeting, forum, Annual Meeting, etc.):

***For questions, please email mmsawards@mms.org
or call Karen Harrison at (781) 434-7463 or Paggy Chen at (781) 434-7007.***