

Physician of the Year Nomination Form

Please return Nomination Form to the NAPA Office by December 30, 2022

NAPA's Physician of the Year Award Criteria

- Awarded annually
- Engaged in active practice

Relationship to Nominee:

• Must employ PA

8700 Executive Woods Dr., STE 400, Lincoln, NE 68512 Email: info@nebraskapa.org Nominee Name: Employer/Clinic: Practice Type/Spcialty: Yes No Does the Nominee Employ PAs? Does the Nominee work with PA students? Yes No Yes No Shadow Preceptor If yes, how and where? Community Involvement Describe why nominee is deserving of the award (Feel free to attach separate sheet) Nominated by: Phone: How can we reach you? Email: