

**BANTING AND BEST DIABETES CENTRE
FACULTY OF MEDICINE, UNIVERSITY OF TORONTO
DIABETES EDUCATOR OF THE YEAR AWARD - 2007**

INSTRUCTIONS FOR SUBMITTING A NOMINATION OR RE-NOMINATION

- Candidates must be nominated for the award by a health care professional.
- Previous recipients of the award cannot be nominated for another 5 years.
 Previous recipients:
 2005 – Helen Jones, Mount Sinai Hospital
 2006 – Marcia Frank, Hospital For Sick Children
- Type size on nomination form must not be smaller than 12 point. Leave 1 inch margins. Print single-sided pages only.
- If the nominator is uncertain when the candidate was first nominated, please contact the BBDC.

New Nomination Procedure:

If the candidate has never been nominated for this award, or if it has been more than two years since the candidate was first nominated, submit a completed nomination form and requested attachments to the Banting and Best Diabetes Centre by the deadline date. Submit only one nomination form per candidate. Please contact the nominee to inform him/her of the intent to nominate, to obtain the necessary information to support the nomination, and to obtain the candidate's CV.

Re-nomination Procedure:

Past nominations are kept on file in the BBDC office for two years after the candidate's initial nomination. Those who wish to re-nominate a candidate are not required to submit a new nomination form if the candidate was nominated within the last two years. (Example: If a candidate was initially nominated for the 2005 award year, the nominator is not required to submit another form for the 2006 or 2007 award years.) Those who wish to re-nominate a candidate must submit the following by the deadline date:

1. **A letter indicating the intent to re-nominate the candidate.** The letter must include the nominator's name, professional title, complete mailing address, phone number, and e-mail address. If applicable, highlight any new diabetes-related achievements or activities that the candidate has been involved in since the initial nomination.
2. **The candidate's complete and updated CV.**
Please contact the nominee to inform him/her of the intent to re-nominate, to obtain the necessary information to support the re-nomination, and to obtain the candidate's up-to-date CV.

Late or incomplete nominations will not be considered.

DEADLINE FOR RECEIPT OF NOMINATIONS IS 4:00 P.M., TUESDAY, NOVEMBER 27, 2007

Important: The BBDC will be moving to the 12th floor of the Eaton Wing in November of 2007. Please check the home page of the BBDC's website www.bbdc.org or call (416) 978-4656 to confirm the address before submitting a nomination. Until then, send applications to:

**Banting and Best Diabetes Centre
Located at the Toronto General Hospital
200 Elizabeth Street
Max Bell Research Centre, 4th Floor, 4R402
Toronto, Ontario M5G 2C4**

**BANTING AND BEST DIABETES CENTRE
Faculty of Medicine, University of Toronto
Diabetes Educator of the Year Award
2007 Nomination Form**

**Candidates must be nominated for the award by a health care professional.
Submit only one nomination form per candidate.
Type size must not be smaller than 12 point. Leave 1 inch margins. Print single-sided pages only.**

Name of nominee:

Title:

Occupation:

Institution:

Address:

Home telephone:

Business telephone:

E-mail address:

- 1. How many years has the nominee worked in diabetes education? _____**
- 2. Give a brief description of the nominee's role as a diabetes educator. Do not exceed the space below.**

3. COMMUNITY INVOLVEMENT

In the space below, describe the nominee's community involvement related to diabetes within the last 5 years only. If extra space is required, one page may be added.

4. PROFESSIONAL DEVELOPMENT

Describe the nominee's diabetes-related involvement in each of the following categories within the last 5 years only.

A) Publications, presentations (poster/oral), and abstracts. If extra space is required, one page may be added.

B) Projects:.. If extra space is required, one page may be added.

C) Programs. If extra space is required, one page may be added.

5. CONTINUING EDUCATION

Describe the nominee's diabetes-related continuing education involvement within the last 5 years only. Start with the most recent. If extra space is required, one page may be added.

6. TEACHING EXPERIENCE

A) Healthcare professionals (e.g. telemedicine, conferences/workshops, in-services, etc.) If extra space is required, one page may be added.

B) Lay teaching (e.g. youth/community groups, etc.) If extra space is required, one page may be added.

7. Describe why you feel the nominee is deserving of this award. Do not exceed this page.

8. ATTACHMENTS

This nomination form **must** be accompanied by the following 2 items:

- A) **One letter of support from a client or community representative indicating the nominee's involvement in patient and community support.** A community representative is defined as a person belonging to a community affected by the nominee's educational contributions. The letter of support should be attached to the nomination form in its original sealed envelope, or mailed directly to the Banting and Best Diabetes Centre to be received by the deadline date. If forwarded separately, it is the responsibility of the nominator to ensure that the letter arrives by the deadline date.

- B) **A copy of the nominee's up-to-date curriculum vitae.**

9. DECLARATION

I, _____ (nominator's name), have read the requirements and rules for the Banting and Best Diabetes Centre, Diabetes Educator of the Year Award Program. I certify that the information provided on this nomination form is, to the best of my knowledge, true and complete. I hereby nominate _____ (nominee's name) for the Diabetes Educator Of The Year.

Nominator's Name:	Signature:
Title:	Date:
Nominator's Complete Mailing Address:	
Phone Number:	
E-mail Address:	