**CSHP NL Branch**

**Alfred G. Dawe Award of Excellence Information**

**Purpose**

This award is presented in honor of Alfred Dawe, who was a part of CSHP NL Branch executive, serving as treasurer of the Branch of CSHP at the time of his sudden passing in June 2002. Alf, as he was more affectionately known, was a hospital pharmacist for 32 years and had retired from his position as Director of Pharmacy at the Salvation Army Grace General Hospital in 1996. Throughout his career, he voluntarily served as Registrar for the Newfoundland Pharmaceutical Association, was a member of the Board of Directors of the Canadian Pharmaceutical Association, and a member of the Pharmacy Examining Board of Canada.

**Award Description**

This award will be given to a member of CSHP NL Branch who has shown significant and extensive contribution to the activities of the Branch. This award does not have to be awarded on an annual basis.

**Selection Criteria and Process**

* The candidate must have provided sustained service to the CSHP NL Branch and have been a long-standing member of CSHP (typically 10 or more years).
* Nominations shall be requested from the CSHP NL Branch membership and must be made by two active members of the Branch.
* Nominations shall be submitted to the Awards Committee in writing no later than September 15 of each calendar year.

* The nomination form must describe clearly the individual’s contribution to the CSHP, with particular focus on Branch activities. Examples of such activities would include involvement with various committees, task forces or council of CSHP. The sharing of information on contributions made to or on behalf of the Branch not covered specifically through committee work is also encouraged. For example, participation in job shadowing programs, educational programs to members, etc.

**Award Presentation**

The award will be announced and presented at the semi-annual meeting of CSHP NL Branch where possible. In the event that presentation is not possible at this time, an alternate time will be chosen to ensure appropriate recognition of the recipient.

**Application Deadline**

Nominations shall be submitted to the Awards Committee in writing. Nominations may be submitted at any time. A call for nominations will be sent at different points during the year. Nominations received up to September 15 will be considered for the award for that calendar year. Nominations received after September 15 will be considered for the award for the next calendar year.

**CSHP NL Branch**

**Alfred G. Dawe Award of Excellence Nomination Form**

We,

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(optional)

Being members of the CSHP NL Branch, hereby nominate:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

To support the nomination, please provide:

A letter outlining the nominee’s contributions to CSHP, particularly to the NL Branch. Examples of activities include: holding office on CSHP NL Branch Council (please specify position(s) held & length/dates of these terms), participation in Branch committees, task forces etc., participation in National council, committees, task forces or other activities that have directly benefited CSHP. This letter must also include information on CSHP membership dates. (From \_\_\_ to \_\_\_\_\_)

Deadline: September 15 (Nominations are accepted throughout the year. Nominations received up to this date are considered for that calendar year.)

The nomination form, along with the supporting documentation, shall be sent to:

Barbara Thomas, Awards Committee Chair

Pharmacy Department

Waterford Hospital

306 Waterford Bridge Road

St. Johns, NL, A1E 4J8

Ph: (709)777-3550 Fax (709) 777-3921

E-mail: [barbara.thomas@easternhealth.ca](mailto:barbara.thomas@easternhealth.ca)