



AMERICAN ACADEMY OF  
FAMILY PHYSICIANS  
STRONG MEDICINE FOR AMERICA

# Thomas W. Johnson Award for Career Contributions to Family Medicine Education

## EMAIL NOMINATION FORM

Satisfactory completion of this form will constitute nomination for the Thomas W. Johnson Award for Career Contributions to Family Medicine Education, provided the guidelines are met.

### PLEASE TYPE ALL INFORMATION

Name of Nominee: \_\_\_\_\_

Professional Title: \_\_\_\_\_

Affiliation: \_\_\_\_\_

Business Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

### NOMINATOR INFORMATION

Name: \_\_\_\_\_

Title/Affiliation: \_\_\_\_\_

Address, City, State, Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Submission: \_\_\_\_\_

Signature: \_\_\_\_\_

*Typing your name in the text box above will act as your digital signature for this form.*

*The AAFP Commission on Education is the official screening body and is empowered to reject any nomination for what, in its opinion, is insufficient documentation.*

**All materials including supporting documentation must be received by March 1.**

Send all nomination materials and documentation to:  
Claudia Caton (ccaton@aafp.org)  
(913) 906-6126 • Fax: (913) 906-6289  
American Academy of Family Physicians  
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