

Nomination for Honorary Fellowship – form

The award of Honorary Fellow is the highest accolade that the RCOphth can bestow, recognising individuals who have made a significant contribution to ophthalmology.

Individuals can be from any field of ophthalmic science, research and medicine or a member of the general public, so long as their work has inspired, contributed to or made an impact in the field of ophthalmology and the wider eye health sector. Generally, awards are made to one or two individuals each year.

*It is important that you do not inform the person you are nominating them.

| Surname: | |
|------------------------------|--|
| Forenames: | |
| Known as: | |
| Title: | |
| Date of Birth: | |
| Address including Post Code: | |
| Telephone number: | |

I nominate the following person for an Honorary Fellowship:

Nomination

[Please tell us how your nominee has made a significant contribution in their area of activity.

We are looking for people with exemplary service, who:

- have changed things, with an emphasis on practical achievement;
- have demonstrated innovation and entrepreneurship;
- are examples of the best sustained and selfless voluntary service;
- have delivered in a way that has brought distinction to UK life.

How does the nominee stand out?

Please list any other ways in which the nominee's contribution has been recognised elsewhere (for example, in the media, by awards, by professional/interest groups)?

It is important that you give as much detail as possible about what your nominee has achieved which makes them stand out against others and make it clear if the achievement is in one area or in a number of different areas.]

Please **<u>do not</u>** include CVs. A maximum of **<u>500 words</u>** only.

Supporters

Please provide the names and addresses of potential supporters in case the College wishes to seek letters in support of the nomination:

Supporter 1:

| Name: | |
|------------|--|
| Membership | |
| no: | |

Supporter 2:

| Name: | |
|------------|--|
| Membership | |
| no: | |

Details of the person making the nomination:

| Surname and post nominals: | |
|--|--|
| Forename | |
| Membership no: | |
| Email address: | |
| Phone number: | |
| Relationship to nominee (eg son, colleague, friend): | |

Signature:

Date:

By submitting this nomination you declare that the information you have provided is – to the best of your knowledge – accurate and complete. Providing false information may lead to your nominee being removed from consideration for an honour.