Please electronicallysubmit the nomination package (general information, brief citation, and narrative) of the student selected for the USPHS Excellence in Public Health Pharmacy Award **no later than February 24, 2017** to CDR Mark S. Miller at: USPHSPharmacyAward@fda.hhs.gov. All areas must be completed. Please save the document as ***USPHS\_StudentAwardApplication\_LastName\_FirstName*** and send it as an attachment.

A confirmation of receipt will be sent via e-mail to your school within 5 business days after submission. If you do not receive confirmation, please contact CDR Mark S. Miller. The school notification of the candidate’s award status will be prior to COB **March 24, 2017**.

**General Information:**

**Publication:**

Grant permission to publish student award (e.g. pharmacy journal)? **Yes or No**

**Student Information:**

Student Name:

Street Address:

City:       State:    Zip:

Name of Pharmacy School/College:

Student’s Year of Graduation:

**Nominator Contact Information:**

Nominator:

Nominator’s Title:

Street Address:

City:       State:    Zip:

Email Address:

Phone Number:

###### Presentation of Award:

Date and Time of Award Presentation:

Location of Award Presentation:

Street Address:

City:       State:    Zip:

###### Contact Person at the School/College (person that the award will be sent to):

Name and Title:

Street Address:

City:       State:    Zip:

Email Address:

Phone Number:

**Brief Citation (25 words or less):**

**Nomination Narrative**

**Please DO NOT exceed the space provided below**