Nomination Form

Email address_



Award for Outstanding Research in Veterinary Medicine 2026

The nominee has been informed of this nomination (required).

1. Nominee perso	nal data	
Full name		
Date of Birth D/M/Y		
Workplace		
Work address		
Phone no	Mobile no	
Email address		
J 11	ish to nominate a group of persons (max 3).	
Workplace		_
Phone no	Mobile no	
Email address		
1.2 Joint nominee r Only applicable if you v	o 2 ish to nominate a group of persons (max 3).	
Full name		
Workplace		
Phone no	Mobile no	

2. Nominator - you

Save the form as pdf once you are finished. The form should be signed with electronic signature by you and the endorser.

Full name	
Date of Birth D/M/Y	
Affilation	
Phone no	Mobile no
Email address	
Date	Signature
2.1 Endorsement	
Your manager/head of department suppor	ting your nomination (required).
Full name	
Role	
Email address	
Date	Signature

3. Popular science summary

Why do you think the person(s) should receive the award. Maximum 600 characters including spaces.

4. Impact on animal health and welfare

Briefly describe the nominees impact on animal health and welfare. Maximum 1,000 characters including spaces.

5. Brief description of academic and/or scientific achievementsPlease provide a clear and concise description of the achievements relevant to the award. Maximum 4,000 characters including spaces.

. Please state the num he nominee is first aut	_	_		where
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