

2023 RACGP Awards

Nomination Form Frequently Asked Question's

Can I make more than one submission/nomination?

Yes, you can. While you can only nominate someone once for an award, if you have multiple people you would like to submit for different awards you can. For example: nominating Dr John Smith for GP of the Year in one nomination and then nomination ABC Practice for General Practice of the Year in another submission.

You will need to complete the nomination form for each nomination you are making.

What happens if I can't answer all of the questions?

That's okay. Answer as many of the questions you can to the best of your knowledge. The reviewing committee will endeavour to fill in the blanks.

How do I know what information I need to supply for the nomination?

Please find below details that are asked under each award category on the nomination form. This will assist you preparing to submit a nomination. If you have any additional information/documents you would like to support the nomination and you don't include them in the nomination, that's okay. Send any additional information over email to awards@racgp.org.au and we'll collect it with the award submission for the reviewing committee.

Award Name	Nominee information	Nominator information	Criteria questions
General Practitioner of the Year	RACGP Mbr # (if known) Name Practice State Phone number Email	Name State Phone number Email	How does the nominee exhibit understanding and commitment to general practice?
			How does the nominee exhibit exceptional service to the public?
			What involvement does the nominee have in GP training and continuing professional development?
			Is there any other supporting information you would like to include in your nomination?
General Practice Supervisor of the Year	RACGP Mbr # (if known) Name Practice State Phone number Email	Name State Phone number Email	How does the nominee exhibit understanding and commitment to general practice training and mentoring?
			How does the nominee exhibit excellent performance as a GP?
			How does the nominee exhibit excellent performance as a role model for registrars?
			What involvement does the nominee have in the delivery of registrar training (e.g. organisation/ administration)?

			Is there any other supporting information you would like to include in your nomination?
GP in Training of the Year	RACGP Mbr # (if known) Name Practice State Phone number Email	Name State Phone number Email	How has the nominee demonstrated commitment to general practice and to learning?
			How has the nominee demonstrated a high level of service to patients, practice and education?
			How has the nominee demonstrated service to their community?
			Is there any other supporting information you would like to include in your nomination?
General Practice of the Year	RACGP Mbr # (if known) Name Practice State Phone number Email	Name State Phone number Email	Describe the structure of the practice, including facilities for both patients and staff.
			Describe the services provided to patients by the practice (e.g. patient education materials, health promotion, preventive care, reminder systems).
			Describe the delivery of services to patients by practice staff.
			Provide an outline of what differentiates this practice from other practices.
			Provide details of the practice's current involvement in general practice teaching.
			Is there any other supporting information you would like to include in your nomination?
Rose-Hunt Award	RACGP Mbr # (if known) Name Practice State Phone number Email	Name State Phone number Email <i>*2 nominators required.</i>	Please outline how the nominee has rendered outstanding services in the promotion of general practice, patient care, education and research and any other means.
			Is there any other supporting information you would like to include in your nomination?
Corlis Medical Educator Award	RACGP Mbr # (if known) Name Practice State Phone number Email	Name State Phone number Email	Please outline how the nominee has substantially contributed to the education and mentoring of doctors who are on any of the RACGP pathways to Fellowship?
			Is there any other supporting information you would like to include in your nomination?
Future Leaders President's Medal	RACGP Mbr # (if known) Name Practice State Phone number Email	Name State Phone number Email	Please describe how the nominee demonstrates excellence in the RACGP Future Leaders Program leadership domains.
			Is there any other supporting information you would like to include in your nomination?
Life Fellowship	RACGP Mbr # (if known) Name Practice State Phone number Email	Name State Phone number Email <i>*2 nominators required.</i>	Please describe how the nominee has provided outstanding and meritorious service to the RACGP?
			Is there any other supporting information you would like to include in your nomination?
Honorary Fellowship	RACGP Mbr # (if known) Name Practice	Name State Phone number Email	Please outline how the nominee has demonstrated meritorious service to the general practice field through education, research or administration and general service to the community?

	State Phone number Email	<i>*2 nominators required.</i>	Is there any other supporting information you would like to include in your nomination?
Honorary Membership	RACGP Mbr # (if known) Name Practice State Phone number Email	Name State Phone number Email <i>*2 nominators required.</i>	Please outline how the nominee has demonstrated meritorious service to the general practice?
			Is there any other supporting information you would like to include in your nomination?
Aboriginal and Torres Strait Islander Health – Standing Strong Together	RACGP Mbr # (if known) Name Practice State Phone number Email	Name State Phone number Email <i>*2 nominators required.</i>	Please describe how the nominee, which must involve a partnership between GP(s) and an Aboriginal and/or Torres Strait Islander person or community group.
			Is there any other supporting information you would like to include in your nomination?
Aboriginal and Torres Strait Islander Health – Growing Strong	RACGP Mbr # (if known) Name Practice State Phone number Email	Self-nomination	Please provide your application statement (600 words max) as to how this award would support your professional development?
			Is there any other supporting information you would like to include in your nomination?
Aboriginal and Torres Strait Islander Health – Medical Student Bursary	RACGP Mbr # (if known) Name Practice State Phone number Email	Self-nomination	Please provide your application statement (600 words max) as to how this award would support your professional development?
			Is there any other supporting information you would like to include in your nomination?
RACGP Rural – Brian Williams Award	RACGP Mbr # (if known) Name Practice State Phone number Email	Name State Phone number Email <i>*2 nominators required.</i>	Provide details of how the nominee has provided exceptional mentoring and support that has enabled rural GPs to safely dedicate themselves to their patients, their families, and their communities.
			Is there any other supporting information you would like to include in your nomination?
RACGP Rural – Rural Registrar of the Year	RACGP Mbr # (if known) Name Practice State Phone number Email	Name State Phone number Email <i>*2 nominators required.</i>	How has the nominee demonstrated commitment to rural general practice and to learning and development?
			How has the nominee demonstrated a high level of service to rural patients, practice and education?
			How has the nominee demonstrated service to their community in which they work?
			Is there any other supporting information you would like to include in your nomination?
RACGP Rural – Medical Student Bursary	RACGP Mbr # (if known) Name Practice State Phone number Email	Self-nomination	1200-word essay required for submission.



RACGP Rural – Community Research Project of the Year	RACGP Mbr # (if known)	Self-nomination	Please describe how your research demonstrates a valuable contribution to the provision to healthcare improvement in a rural or remote general practice.
	Name Practice State Phone number Email		Please describe how your research demonstrates evidence of innovative thinking.
			Is there any other supporting information you would like to include in your nomination?