

Mayo Clinic Alumni Association Humanitarian Award

The Mayo Clinic Alumni Association Humanitarian Award acknowledges significant contributions by an alumnus or alumna of Mayo's education programs to the welfare of a community, country or humanity, beyond any volunteer service to Mayo. The recipient(s) will demonstrate the commitment of the Mayo Brothers to service of humanity.

Dr. W. J. Mayo said, "...any person who had physical strength, intellectual capacity or unusual opportunity held such endowments in trust to do with them for others in proportion to his gifts." This award is intended to recognize the significant contributions of individuals who enrich the lives of people through service to the community in the areas of public health or public service.

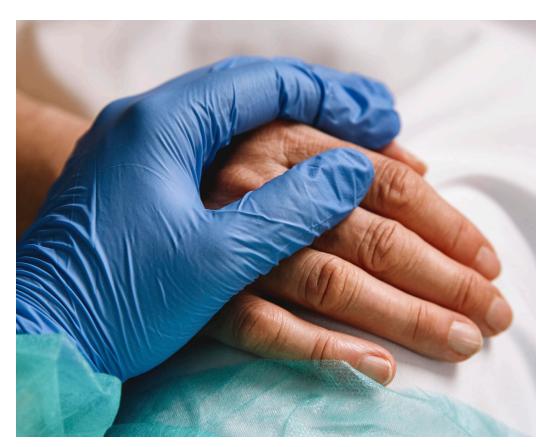
THE AWARD

The award will be presented at biennial meetings of the Mayo Clinic Alumni Association. Travel and hotel expenses will be provided. Recipient(s) must attend the Mayo Clinic Alumni Association biennial meeting in order to receive the award.

CRITERIA

A Mayo Clinic Alumni Association member who meets one or more of the following criteria:

- Provides exceptional service through volunteerism or significant service to a population
- Promotes the art and science of medicine
- Is recognized for contributions to under-served populations or provides services in challenging situations



NOMINATION PROCESS

To be considered for this award, a completed nomination form and letter by a Mayo Clinic Alumni Association member, nominee's curriculum vitae and bibliography, letters of recommendation and supporting information should be submitted. Supporting information may include letters of commendation, awards, newspaper articles, or other information to support the nomination. The nomination letter should include examples of how the nominee has contributed to public health or service. A committee comprised of representatives from the Mayo Clinic Alumni Association, the Mayo Clinic Alumni administrator, and the secretary-treasurer of the Association will review the applications and select the recipient(s).

FOR MORE INFORMATION:

Mayo Clinic Alumni Center 200 First Street S.W. Rochester, MN 55905 Telephone: 507-284-2317 Fax: 507-538-7442 E-mail: mayoalumni@mayo.edu

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NOMINATION FORM

Please print or type and return this form and supporting material to the address given below by March 1, 2023.

NOMINATOR INFORMATION (NOMINATOR MUST BE A MAYO CLINIC ALUM)

Name	
Title	
Address	
Phone Number	Fax Number
E-mail Address	
NOMINEE INFORMATION	
Name	
Title	
Address	

E-mail Address

EACH NOMINATION PACKET MUST INCLUDE:

· Letter of nomination (Please describe in detail how this nominee meets the criteria)

Phone Number______ Fax Number ______

- Curriculum vitae and bibliography
- Supporting letters (3-5 are recommended)

Name		Name
1	4	
2	5	
3	6.	

Letters of commendation, awards, newspaper articles or other information (Optional)

Send nomination to:	Mayo Clinic Alumni Center	Telephone: 507-284-2317
	200 First Street S.W.	Fax: 507-538-7442
	Rochester, MN 55905	E-mail: mayoalumni@mayo.edu