

Candidature for the United Arab Emirates Health Foundation Prize

Part I-a: For candidature of an individual

This section should NOT be completed where an institution or a non-governmental organization is being nominated as a candidate for the Prize.

Personal information	
First names:	Last name:
Address:	
Nationality:	
Date of birth:	Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male

Contact details
Email(s):
Telephone number(s) <i>(include country and city codes)</i> :
Fax:
Website <i>(if available)</i> :

[illegible][illegible][illegible]

Part I-b: For candidature of an institution or non-governmental organization (NGO)

Note: This section should NOT be completed where an individual is being nominated as a candidate for the Prize.

Institution or NGO name:		
Address of headquarters:		
Name of Chief Executive Officer:		
E-mail address(es):		
Telephone number(s) <i>(include country and city codes):</i>		
Date of establishment of Institution or NGO:		
Website <i>(if applicable):</i>		
Statutory purpose(s) and mission <i>(up to 100 words):</i>		
Legal form and governance <i>(up to 100 words):</i> Please indicate the entity type <div style="margin-left: 20px;"> <input type="checkbox"/> Non-governmental organization <input type="checkbox"/> Academic Institution <input type="checkbox"/> Philanthropic foundation <input type="checkbox"/> Government institution <input type="checkbox"/> Other, please describe: </div>		
Main activities <i>(up to 100 words):</i>		
Membership and affiliations <i>(if applicable):</i>		
Main sources of funding <i>(up to 100 words):</i>		
Awards and honours:		
Date <i>(dd.mm.yyyy)</i>	Awarding body	Name of Award

Part II: Justification for nomination of the candidate

1. Please give details of outstanding work and achievements of the candidate in health development since the promotion of the [global strategy for achieving health for all by the year 2000](#), which would qualify the candidate for the Prize and that extend far beyond the call of normal duties. Attach other sheets if necessary.

2. Please outline how the candidate meets the selection criteria set out in the [Guidelines](#) for the Prize.

3. If you wish to provide additional relevant documentation in support of the application (maximum of 20 pages in total), please provide a list of attached documents here:

Submitted by:	
<input type="checkbox"/>	National health administration of a WHO Member State
<input type="checkbox"/>	Former recipient of the Prize
Name and address of the national health administration or the former recipient of the Prize submitting the application:	
Name and title of the authorized representative of the national health administration or the former recipient of the Prize, as applicable (please type or write as capital letters):	
Email of the signatory:	
By signing this form, the signatory confirms that he/she is authorised to sign on behalf of the national health administration or the former recipient of the Prize, as applicable:	
<input type="checkbox"/>	Signature: _____ Date: _____

Note: should the signatory not be able to type his/her name, please indicate the typed name either in a Word version of the candidature form, or in the accompanying Note Verbale.