



# PARA

Professional Association of  
Resident Physicians of Alberta

## Resident Physician of the Month Recognition Guidelines

**Objective:** To improve resident physician well-being by recognizing and rewarding outstanding resident physicians who make exceptional contributions in their academic field while still maintaining their work/life balance.

**Eligibility:** All resident physicians, with the exception of PARA Executive and Assembly Board Members, are eligible to be nominated. Nominations can be submitted by fellow resident physicians, work colleagues, and anyone who finds the recipient worthy of recognition. Nominations can be made by emailing the attached nomination form to [emma.frieser@para-ab.ca](mailto:emma.frieser@para-ab.ca) explaining why the nominee merits recognition.

**Nominees:** The PARA Resident Physician of the Month nominee should be a resident physician who exemplifies a balanced lifestyle and well-being. She/he should be noteworthy in one or many of the following areas: academic accomplishments, research activities, social events, family life, athletic pursuits, and or community involvement and humanitarian service. Feel free to include any particular event or patient/co-worker encounter that made this person stand out as exemplary. A brief biography would also be helpful (place of birth, academic/personal history etc.).

**Selection:** When required, selection is through the PARA Nomination and Awards Committee.

**Award:** The Resident Physician of the Month will be awarded a prize valued at \$125.00. A letter of award will be sent to the Resident Physician recipient, as well as their Program Director.

**NOMINATE someone you know to be the Resident Physician of the Month!**



# PARA

Professional Association of  
Resident Physicians of Alberta

## Resident Physician of the Month Recognition Nomination Form

### Nominator (include work location)

Name: \_\_\_\_\_

Hospital Site: \_\_\_\_\_

Relationship with Nominee: \_\_\_\_\_

### Resident Physician of the Month Nominee

Name: \_\_\_\_\_

Program: \_\_\_\_\_

Postgraduate Year: \_\_\_\_\_

Email: \_\_\_\_\_

Rationale: (Please describe below the reasons you are nominating this resident physician, including any academic or extra-curricular activities you see as pertinent to the resident physician nominee who exemplifies a balanced lifestyle and well-being [Max. 200 words].)

### Submission information:

By Email: [emma.frieser@para-ab.ca](mailto:emma.frieser@para-ab.ca)

By mail: PARA #320, 11044 – 82 Avenue  
Edmonton, Alberta T6G 0T2