

CIHR Barer-Flood Prize in Health Services and Policy Research

Nomination Form

1.	Nominee Information:			
	Name/PIN:			
	Affiliation:			
	Address:			
	Telephone number:			
	E-mail address:			
2.	Nominator Information:			
	Name:			
	Affiliation:			
	Address:			
	Telephone number:			
	E-mail address:			
3.	Potential Assessors:			
	Name		Affiliation	Addresses (including email)