



## **2025 VASM J. Catesby Ware, PhD Physician Recognition Award Application**

To be considered for the award, the nominee must be a current VASM member in good standing. The VASM Award committee will review each application and the recipient will be notified by email.\* The VASM Board will present the award to the recipient at the VASM Annual Conference in Richmond and it will be announced on the VASM website.

### **Application Process**

1. The **VASM J. Catesby Ware, PhD Recognition Award Application** must include:
  - a. Completed application
  - b. Nominee's CV
2. The completed application must be received by the VASM **no later than September 29, 2025.**
3. Send the required information to:

### **VASM J. Catesby Ware Award Committee**

Virginia Academy of Sleep Medicine  
c/o Susan McConnell, Society Manager  
[smcconnell@ramdocs.org](mailto:smcconnell@ramdocs.org)

*\*The winner will be notified as soon as possible to allow for arrangements to attend the annual meeting.*

**Please note: Applications with questions left unanswered will be deemed incomplete and will be eliminated automatically from consideration.**



## 2025 VASM *J. Catesby Ware, PhD* Recognition Award Application

NAME OF NOMINEE:		CREDENTIALS:	
# OF YEARS IN PRACTICE			
<b>NOMINEE CONTACT INFORMATION</b>			
E-MAIL:			
PHONE (H):			
PHONE (M):			
PRACTICE NAME:			
<b>NOMINEE INFORMATION</b>			
HOW HAS THE NOMINEE'S SERVICE IMPACTED THE HEALTH OF THE POPULATION SERVED?			
WHAT, PRECISELY, MAKES THIS NOMINEE SPECIAL?			
PLEASE LIST & EXPLAIN ACTIVITIES, ACHIEVEMENTS, & CONTRIBUTIONS THAT DEMONSTRATE THE NOMINEE'S COMMITMENT TO HEALTH CARE.			
PLEASE PROVIDE ANY ADDITIONAL COMMENTS OR INFORMATION YOU FEEL WOULD BE BENEFICIAL TO THE SELECTION PANEL.			

I KNOW THE NOMINEE TO HAVE UPHELD THE PROFESSIONAL  
STANDARDS AND ETHICS OF THE VIRGINIA ACADEMY OF SLEEP  
MEDICINE THROUGHOUT HIS/HER CAREER.

\_\_\_\_\_  
SIGNATURE OF NOMINATOR

\_\_\_\_\_  
NOMINATOR NAME

\_\_\_\_\_  
NOMINATOR EMAIL

\_\_\_\_\_  
DATE: