

Department of Science and Technology PHILIPPINE COUNCIL FOR HEALTH RESEARCH AND DEVELOPMENT

NOMINATION FORM

GRUPPO MEDICA Award For Outstanding Research in Herbal Medicine

1	Nominee(s)				
	1				
	Family Name	First Name	MI		
	Home Address			Attach 1x1	
	Phone # / Cell phone #	Date of B	irth	photo	
	Course :	Expected Year of Gra			
	2				
	Family Name	First Name	MI		
	Home Address			Attach 1x1	
	Phone # / Cell phone #	Date of B	irth	photo	
	Course :	Expected Year of Gra	duation:		
	3				
	Family Name	First Name	MI		
	Home Address			Attach 1x1 photo	
	Phone # / Cell phone #	Date of B	irth	photo	
	Course :	Expected Year of Gra	duation:		
2					
2	Nominee's Institutional Affiliation				
	Complete Name of School (include College of, Dept of, or Institute of)				
	Complete address of School				
	Phone no (s)	Fax no			

Please use additional sheets if necessary.

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3	Research Project
	Project title
	Date project was started Date project was completed (Month / Year)
	Objectives
	Keywords (at least 5)
	Short Summary of the Project (Describing briefly the following: Rationale of the project, brief review of literature, methodology describing the subject population and data collection methods, intervention & outcome measurements)
	State at least three significant points on how the project contributes to the advancement of knowledge on Philippine medicinal plants or its contribution to the promotion of the proper use of medicinal plants and/or its potential for commercialization
	State the weakest and strongest point/s of the thesis.

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We hereby endorse the abovementioned project for the GRUPPO MEDICA AWARD.		
Signature over printed name ADVISER	Signature over printed name DEAN	
Date	Date	

NOTE:

Maximum of three (3) thesis project can be endorsed per school / college. The endorsed thesis project may be published in reputable publications.