**Entry Form**

Please indicate which category you are entering

|  |  |
| --- | --- |
| **Award category** | Please tick |
| Improving Quality in Perinatal Care |  |
| Supporting the Perinatal Team  |  |
| Excellence in research or innovation |  |
| Making a difference for families |  |
| Outstanding contribution to BAPM by a trainee |  |
| Outstanding contribution to BAPM by a nurse, ANNP, midwife or AHP |  |

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| **Applicant Details** |
| Named Applicant(s) (must be BAPM members): |  |
| Unit: |  |
| Hospital: |  |
| Address: |  |
| Email: |  |
| Phone: |  |

|  |
| --- |
| **Nominee Details** |
| Name of individual(s) or team: |  |
| Unit: |  |
| Hospital: |  |

|  |  |
| --- | --- |
| **Entry word count (max 350):** |  |

**Entry:**

Please explain in 350 words or less why the named nominee should receive a BAPM award. Please refer to the category judging criteria and examples to help you with your application.

If possible please attach any photos or pictures you have which illustrate or celebrates the achievement. (You must have permission to share these pictures and by including these you give BAPM permission to use these alongside details of your entry in awards materials.)

You should include:

1. What has the individual or team done?
2. What was the outcome of this?
3. How has this helped their fellow professionals and / or babies and their families