

Entry Form

The Sixteenth Annual NIHCM Foundation Health Care Research Award

Entrant's Name:

Title:

Organization:

Address:

City:

State:

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Fax:

Email:

Entry Title:

Where and when was this research article published?

Please specify how you learned about the Research Award.

Be sure to include **TWO** clear copies of **EACH** the following:

- Completed entry form for each entry
- 8.5"x11" copy of the article
- A brief biography of the author(s). Please include contact information for **each** author.
- A summary (100 word or less) description of how the entry is relevant to one or more of the subject areas:
 - 1) Health care financing, delivery, or organization
 - 2) Implementation of health policy

Please submit entries to:
Nancy Chockley
President & CEO
NIHCM Foundation
1225 19th Street, NW, Suite 710
Washington, DC 20036-2604

Signature of Entrant

Limit of two entries per author. Entries must be postmarked by February 26, 2010