

NCMGMA Practice of the Year Presented by First Citizens Bank



2023 Entry Form

Know a practice that's doing amazing things in the community? Is it your practice? Submit a nomination today!

The North Carolina Medical Group Management Association (NCMGMA) is proud to partner with First Citizens Bank to present the 10th annual **Practice of the Year Award**, to be presented on the evening of Thursday, September 14th at Grandover Resort in Greensboro during the NCMGMA Fall Conference.

This award recognizes a medical group practice that has made a significant contribution to their community, patients and/or staff through volunteer work, indigent clinics, fundraisers, staff wellness programs, community clean ups, community screenings and education (internal & external), etc....

Award recipient will receive:

- An attractive award piece,
- A donation to be made in the practice's name to their charity of choice,
- Public recognition at the NCMGMA Conference,
- Promotion through a press release to national trade and consumer media, and
- Recognition in the NCMGMA Quarterly Newsletter and E-News Blog

To submit your organization for Practice of the Year, please answer the questions either using this form or on a separate sheet. All nominations for this award are due by 5pm on August 4th.

Submit Nominations (Word or PDF) by 5pm on August 4th to:

Email: Melissa@ncmgm.org

Mail: NCMGMA Practice of the Year

1300 Baxter St., Suite 360

Charlotte, NC 28204

Questions? Please call our offices at 704-365-0565 or 1-800-753-6462 or send an inquiry via email to info@ncmgm.org.



North Carolina Medical Group Management Association

2023 Practice of the Year - Nomination Form Presented by First Citizens Bank

Medical I	Practice Name
Main Cor	ntact:
Phone:	Email
Exhibit A.	Describe what significant contribution(s) your organization has made to the community, your patients raff.
Exhibit B.	What impact did this/these contribution(s) have on the community, patients, and/or staff?
Exhibit C.	Explain the purpose, goals, and longevity of this/these contribution(s).
Exhibit D	: Please detail the level of involvement the practice has given to this/these contribution(s).
Exhibit E:	Provide examples of what this/these contribution(s) has returned to the community, patients, and/or
	Please share what charity your practice would contribute to, if given the opportunity to win this year's of the Year award, and why.