



## School of Medicine

University of Missouri

# MU Medical Alumni Organization • Medical Alumni Awards

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Since 1956, the University of Missouri Medical Alumni Organization has annually recognized alumni for outstanding achievement, contributions to the field of medicine and support of the MU School of Medicine. The award categories include:

### **Citation of Merit Award**

This award recognizes MU School of Medicine alumni who have made significant contributions to the medical profession.

### **Distinguished Service Award**

This award recognizes MU School of Medicine alumni who have distinguished themselves through medical service.

### **Outstanding Young Physician Award**

This award recognizes MU School of Medicine alumni who have distinguished themselves in the field of medicine early in their career. Nominees must be age 45 or younger at the time of nomination.

### **Honorary Medical Alumni Award**

This award recognizes non-alumni who have demonstrated special interests in the MU School of Medicine and the Medical Alumni Organization.

## Nomination Process

Nominations for the **2026 Medical Alumni Awards** will be accepted through **May 15, 2026**.

Nominations will remain active for two years.

### Nomination Materials

Required:

- Nomination Form
- Letter of Nomination highlighting contributions and facts supporting the candidate's qualifications for consideration
- A CV/resume listing career history, publications, awards, accomplishments, etc.

Recommended:

- Additional letters of support
- Bio/Bio Sketch of the nominee
- Articles highlighting the nominee's contributions

Nomination materials can be submitted by email to [mumetalumni@health.missouri.edu](mailto:mumetalumni@health.missouri.edu) or mailed to:

Medical Alumni Awards Committee

MU Medical Alumni Office

107 Reynolds Alumni Center

Columbia, MO 65211

For more information or for assistance with the nomination process, contact the Office of Alumni Affairs at [mumetalumni@health.missouri.edu](mailto:mumetalumni@health.missouri.edu) or 573-882-5021.

University of Missouri School of Medicine

**Medical Alumni Awards**

**2026 Nomination Form**

Nominations must be received in the  
Medical Alumni Office no later than  
5pm on Friday, May 15, 2026.

*Please type or clearly print all information. Please do not staple nomination materials.*

**CATEGORY FOR NOMINATION:**

|  |  |
|--|--|
| <input type="checkbox"/> Citation of Merit Award*    | <input type="checkbox"/> Outstanding Young Physician Award |
| <input type="checkbox"/> Distinguished Service Award | <input type="checkbox"/> Honorary Medical Alumni Award     |

*\*Please note: The Citation of Merit Awardee must attend the Awards Ceremony to be held in Columbia, MO.*

**NOMINEE'S INFORMATION**

|            |                   |           |               |
|------------|-------------------|-----------|---------------|
| First Name | M.I. /Maiden Name | Last Name | MU Class Year |
|------------|-------------------|-----------|---------------|

|              |       |
|--------------|-------|
| Company Name | Title |
|--------------|-------|

|   |            |
|---|------------|
| Email Address <input type="checkbox"/> Home <input type="checkbox"/> Office | Cell Phone |
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|                |      |       |     |              |
|----------------|------|-------|-----|--------------|
| Office Address | City | State | Zip | Office Phone |
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| Home Address | City | State | Zip | Home Phone |
|--------------|------|-------|-----|------------|

Preferred Mailing Address  Home  Office

**Nominated By:** \_\_\_\_\_ Date: \_\_\_\_\_

|            |                   |           |                |
|------------|-------------------|-----------|----------------|
| First Name | M.I. /Maiden Name | Last Name | MU Class Year* |
|------------|-------------------|-----------|----------------|

|              |       |
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| Company Name | Title |
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|   |            |
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| Email Address <input type="checkbox"/> Home <input type="checkbox"/> Office | Cell Phone |
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| Home Address | City | State | Zip | Home Phone |
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Preferred Mailing Address  Home  Office

\*If applicable; nominator does not need to be an alumnus/a of MU.