

Nominate a Fellow

for the 2010 Celgene Awards for Clinical Research in Hematology

Award recipients will be determined by an independent selection committee based on their clinical contributions to hematology.

Future Leaders in Hematology Award

The *Future Leaders in Hematology Award* will be presented to 5 fellows who have contributed greatly to the hematology field. For each fellow, award funds in the amount of US \$10,000 will be offered as a grant to the fellows program of the awardee's institution where the fellow was conducting research and training at the time of the nomination.

How to Nominate a Fellow

To nominate a fellow, please complete the nomination form and provide the following materials:

- a nomination letter describing the impact of the nominee's work on the understanding, diagnosis and/or treatment of hematologic diseases
- an example of 1 of the nominee's contributions in the form of a published abstract or journal article
- a letter from another colleague seconding your nomination
- the nominee's current CV

Please consider individual institutional policies when nominating a fellow.

Deadline is October 7th, 2010

Judged by an independent committee

Please send the completed form (or a copy of it) with the required materials to:

Xcenda
Attn: Amanda Marks
220 26th St. NW
#6401
Atlanta, GA 30309
Fax: 727-683-9776

All nominees will be notified of their nomination. The presentations will occur on December 4th, 2010, in Orlando at a separate recognition function hosted by Celgene.

Nomination Form

Your Name _____ Degree _____

E-mail _____

Affiliation/Institution _____

Address _____

City _____ State _____

Country _____ Postal Code / ZIP _____

Office Phone _____ Fax _____

For additional nomination forms, please photocopy this form or go to <http://events.SignUp4.com/CelgeneAwards>

Please contact Amanda Marks [e-mail: amanda.marks@xcenda.com or phone: 404-213-1901] with questions regarding the program or this form.

Sponsored by Celgene Corporation.

Future Leaders in Hematology Award

Nominee's Name _____ Degree _____

Address _____

City _____ State _____

Country _____ Postal Code / ZIP _____

Office Phone _____ Fax _____

E-mail _____

Affiliation/Institution _____

Affiliation/Institution Contact _____ Phone _____

