

The designation, Fellow of the American College of Osteopathic Family Physicians (ACOFP), signifies the recognition of the member's experience, dedication, and contributions of the highest order to the advancement of family practice by his/her peers.

QUALIFICATIONS

The Award of Fellow in the American College of Osteopathic Family Physicians may be conferred on founder and active members who meet the following qualifications:

1. Have been an active [dues-paying member](#) of the ACOFP for at least six consecutive years (starting after residency and prior to nomination).
2. Have served a one-year AOA-approved internship, or its equivalent. In the event the nominee has not served a one-year AOA-approved internship or its equivalent, the nominee shall have been an active dues-paying member of this College for at least eight consecutive years prior to nomination.
3. Be certified by the American Osteopathic Association (AOA) or the American Board of Medical Specialists (ABMS).
4. Actively participate in local/state osteopathic organizations and/or their ACOFP state society. Support past and current hospital and national activities of the ACOFP.
5. Contributed outstandingly through teaching, authorship, research, professional leadership, or as a moderator at an ACOFP National Convention or Intensive Update and Board Review.
6. Must have attended and registered as a family physician a minimum of at least SIX ACOFP Annual Convention & Scientific Seminars or AOA's Annual Osteopathic Medical Conference and Exposition in the immediate past TEN years. At least THREE meetings must be ACOFP Annual Convention & Scientific Seminars and the remainder may be AOA OMED.
 - a) Only ONE ACOFP Annual Convention & Scientific Seminar registration and attendance during residency may be used for the three ACOFP Annual Convention & Scientific Seminar meeting requirements.
 - b) One ACOFP Intensive Update & Board Review in Osteopathic Family Medicine may be used in place of an OMED Annual Convention. Candidates may count the ACOFP Annual Convention & Scientific Seminar registration that they will receive the Fellow Award at as one of the ACOFP meetings.
 - c) A nominee in the military who is unable to attend the ACOFP and AOA Conventions may substitute up to three Association of Military Osteopathic Physicians & Surgeons Conventions for AOA Annual Conventions. The AMOPS meeting substitution applies only to those on "active duty."

Completed applications are due to ACOFP by [September 15, 2018](#) for the next Conclave of Fellows Awards Ceremony during the 2019 ACOFP Annual Convention & Scientific Seminars.

NOMINEE REQUIREMENTS

The Award of Fellow in the American College of Osteopathic Family Physicians may be conferred on founder and active members who meet the following requirements:

1. ONE letter of recommendation from the sponsor and ONE letter of recommendation from their ACOFP state society. If there is not an active state society, a letter of recommendation from another ACOFP Fellow who practices in the area or state of the nominee is acceptable.
2. Submission of an unpublished scientific paper pertinent to family medicine and suitable for publication.
 - a) The nominee must attest that he/she is the **primary author** of the submitted, unpublished scientific paper.
 - b) The paper must be submitted to the sponsor one month in advance for initial review, editing and approval.
 - c) The sponsor must submit a written appraisal of the nominee's paper, which must be included with the completed application, prior to consideration.
 - d) All papers that are submitted shall become the property of ACOFP.
 - e) Guidelines for the scientific papers: Must be written in APA or MLA format (see "How to Write a Scientific Article" or refer to the Submissions section of www.ofpjournal.com); text should be limited to 3,000 words (not including title page, abstract and references); must include a 250-word abstract, footnotes and references; if charts or pictures are referenced or copied from other sources, appropriate citations must be included.
3. Upon approval, the successful nominee must submit an additional \$375 for ceremony expenses including the cap and gown rental. This fee must be received prior to the nominee receiving the award.

SPONSOR REQUIREMENTS

1. Contact ACOFP to submit the name of your nominee prior to submission of their completed application by emailing fellowsinfo@acofp.org.
2. Submit ONE letter of recommendation.
3. The sponsor must submit a written appraisal of the nominee's paper, which must be included with the completed application, prior to consideration.
4. An application fee of \$225 must be submitted by the sponsor prior to consideration for all administrative and Awards Committee expenses. A suitable portion of the fee, as determined by the ACOFP Board of Governors, may be refunded to the sponsor of an unsuccessful candidate.

Any active Fellow may nominate only one qualified member for the Award of Fellow each year. The sponsor may be contacted for consultation should the Awards Committee find the nominee's application needs corrections or additional clarification. This Award shall not be conferred on any person outside of the osteopathic profession. Notwithstanding any of the requirements herein above stated, the ACOFP Board of Governors shall have the authority, in its discretion, to confer the Award of Fellow in the ACOFP on an active member, in addition to those nominated by the Awards Committee. The nominee shall be approved by a confidential majority vote of the ACOFP Board of Governors.

Name of **Nominee**: _____ AOA # of **Nominee**: _____

Name of **Sponsor**: _____ AOA # of **Sponsor**: _____

APPLICATION SUBMISSION CHECKLIST

- Completed signed application including current curriculum vitae and current AOA CME Activity Report.
- ONE letter of recommendation from the sponsor.
- ONE letter of recommendation from their ACOFP state society. If there is not an active state society, a letter of recommendation from another ACOFP Fellow who practices in the area or state of the nominee is acceptable.
- Electronic submission of the unpublished scientific paper and attestation form.
Send to fellowsinfo@acofp.org.
- Completed Sponsor's written appraisal of the scientific paper.
- Headshot Photo
- Application fee of \$225 from the Sponsor. Checks made payable to ACOFP.
- Pending approval, Ceremony fee of \$375 from the nominee. Checks made payable to ACOFP.

Completed applications are due to ACOFP by **September 15, 2018** for the next Conclave of Fellows Awards Ceremony during the 2019 ACOFP Annual Convention & Scientific Seminars.

Please contact ACOFP Brittany Balletto at **847.952.5103** with questions or concerns.

Please mail all completed applications to:

ACOFP Awards Committee
330 E. Algonquin Road, Suite 1
Arlington Heights, Illinois 60005
Fax: (847) 228-9755
Email: fellowsinfo@acofp.org

APPLICATION

Name of **Nominee**: _____ AOA # of **Nominee**: _____

Preferred Mailing Address: Home Office

Home Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Cell Phone: _____

Email Address: _____

Company Name: _____

Company Address: _____

City: _____ State: _____ Zip Code: _____

EDUCATION

Pre-Professional College(s) attended:

Name of School: _____

City: _____ State: _____ Year Graduated: _____

Degree: _____

Name of School: _____

City: _____ State: _____ Year Graduated: _____

Degree: _____

College(s) of Osteopathic Medicine Attended

Name of School: _____

City: _____ State: _____ Year Graduated: _____

Degree: _____

Name of School: _____

City: _____ State: _____ Year Graduated: _____

Degree: _____

Internship Program Attended

Name of Program: _____ AOA Approved:

City: _____ State: _____ Year Graduated: _____

Residency Program Attended

Name of Program: _____ AOA Approved:

City: _____ State: _____ Year Graduated: _____

Certification

Family Medicine Other: _____

Year Certified: _____ Year Recertified: _____

List current state licenses: _____

MEMBERSHIP / AFFILIATIONS

ACOFB dues-paying member since: _____

List positions held in national ACOFP: _____

List memberships in local or state organizations: _____

List positions held in the local or state organizations: _____

List memberships in other national organizations: _____

List positions in other national organizations: _____

List current hospital affiliations: _____

List positions held in the listed hospitals: _____

Nominee Signature: _____ Date: _____

Sponsor Signature: _____ Date: _____

CONVENTION ATTENDANCE

List the last six (6) ACOFP or AOA Annual Conventions attended and registered as a family physician in the past ten (10) years. Indicate attended conventions on AOA CME report.

- At least three (3) MUST be the spring ACOFP Annual Convention
- The remaining three (3) may be fall OMED Annual Convention
- One (1) ACOFP Intensive Update may count as an OMED Annual Convention
- Nominee may count the Convention in which they become a Fellow as one of the ACOFP Conventions attended.

CONVENTION	YEAR
1) _____	_____
2) _____	_____
3) _____	_____
4) _____	_____
5) _____	_____
6) _____	_____

SCIENTIFIC PAPER CRITICAL APPRAISAL REPORT

Name of **Nominee**: _____ AOA # of **Nominee**: _____

Scientific Paper Title: _____

Attestation of Writing Assistance

Are you the primary author of the submitted scientific paper? Yes No

If no, did the authors assist in writing the text or conducting statistical analyses of the data?

Provide the name(s) of those who assisted in the writing: _____

By signing below, I certify that I have read and approved the submitted scientific paper for publication, and I certify to the best of my knowledge that the information provided on the application is true and accurate.

Nominee Signature: _____ Date: _____

(Below to be completed by the sponsor)

Name of **Sponsor**: _____ AOA # of **Sponsor**: _____

As sponsor of the stated nominee, I have read the scientific paper and feel the paper is:

Excellent Good Satisfactory Not Good Poor

1) Abstract 5 4 3 2 1
Comments: _____

2) Introduction 5 4 3 2 1
Comments: _____

3) Methods 5 4 3 2 1
Comments: _____

4) Results 5 4 3 2 1
Comments: _____

5) Discussion 5 4 3 2 1
Comments: _____

6) Conclusion 5 4 3 2 1
Comments: _____

7) Acknowledgments 5 4 3 2 1
Comments: _____