

**NOMINATION FORM**

**Dr. Elmer L. Green Oral Public Health Award - 2023**

The Dr. Elmer Green Oral Public Health Award will be presented on

Friday October 27th, 2023 during the

New York State Oral Health Coalition Annual Meeting

Submit nominations to *NYSOHC@gmail.com*

**Nominations must be received by September 29. 2023**

Dr. Elmer L. Green was hired by the New York State Department of Health as a regional public health dentist in 1973. He was promoted to director of the Bureau of Dental Health in 1985 and served in that capacity until his retirement in 2010. Dr. Green received his Doctor of Dental Surgery degree from Howard University and a Masters of Public Health from the University of Michigan.

Developing innovative clinical programs, mentoring public health dental residents, and supporting community initiatives that improve oral health were hallmarks of his tenure. For his efforts to improve the oral health of all New Yorkers, Dr. Green received the Governor’s Award for Excellence in State Government in 2005 and the New York State Department of Health Lifetime Achievement Award in 2009. In addition to his many career accomplishments, Dr. Green will be remembered for his mild manner, his ever-present smile, and his steadfast devotion to oral health.

**Nomination:**

With this award, the New York State Oral Health Coalition recognizes individuals who emulate Dr. Green’s devotion to oral health promotion. The recipient should demonstrate achievement in the field of oral health promotion and show evidence of challenging traditional policy or public health practice to improve oral health in an ongoing, effective, and innovative manner.

**Nominee:**

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Justification:**

*Please describe why you are making this nomination in no more than 600 words.*

[INSERT YOUR TEXT]

Your name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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