

**Beckman Coulter Life Sciences**
CARES Award Application Form

ORGANISATION | ENDEAVOR

Please list the region, country/countries served by this work?

Does the nominee's organisation/endeavor have any key partnerships or affiliations that it has leveraged as a key to its success?

Yes No

If YES please provide a list

Optional: If you think it would be helpful for our understanding of the impact of the organisation/endeavor of your nominee you are welcome to provide us with 1-2 articles to support this work and/or 1-2 video links. Please continue on a separate sheet if required.

All fields are required. Please type or print clearly.

Note: Please attach the CV of the nominee.



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NOMINEE

Name

Position/
Organisation

Address

City State

Post Code Country

Email

Citizenship

Phone (work) Phone (other)

Organisation/
Endeavors
Web Site



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NOMINEE

Describe the mission of your nominee's organisation / Endeavor in one paragraph

Is this the first time the Nominee has been nominated?
If no please list the year(s) of previous nominations

Yes

No

Please list any other significant awards, prizes and recognitions the nominee has received, including dates (you may use an additional sheet if required).

May we have permission to share the nominee's work within our network?

Yes

No



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KEY QUESTIONS

1/ What is your nominee's vision for change to improve outcomes fighting HIV/AIDS in their community?

2/ How has your Nominee impacted their community and lives of PLHIV by enacting his/her vision and what have been the measurable results?

Please continue on a separate sheet if required.



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SUBMISSION

Please ensure all fields have been completed and all information is legible. Please ensure any additional sheets or supporting information clearly states the nominee's name in the upper right hand corner.

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	I have included a CV/Resume of the nominee (if available)
<input type="checkbox"/>	<input type="checkbox"/>	I have submitted additional sheets of information with the nominee name clearly stated

How to deliver your nomination package:

All material must be submitted in one email including original letters and forms signed by their respective authors, without exception. All nominations must be received in the Award office no later than:

5pm GMT: August 31st

Nominations move forward for consideration together as soon as the nomination process closes. In fairness to the cohort of Award nominee's, late nominations will neither be considered nor acknowledged. The submission email address is: CARES@beckman.com

Alternatively post to:

CARES Award (c/o Downsborough)
Beckman Coulter Life Sciences
5350 Lakeview Parkway S Dr. M/S
S-11 Indianapolis, IN 46268
United States

All nominations will be acknowledged in writing.

Nominee Name (Print)

Signature

Date

Disclaimer

All Nominators grant Beckman Coulter Life Sciences the right to copy, reprint, quote or publish the information submitted as part of its awards program or other public communication. Nomination materials become the property of Beckman Coulter Life Sciences and will not be returned. *Please see CARES App Form Rules for more information and exclusions.*



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ADDITIONAL SHEET



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ADDITIONAL SHEET



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