2025 TE TOHU RAPUORA MEDAL NOMINATION FORM

Coversheet

Nominee: Click here to enter text.

Nominee contact email and phone: Click here to enter text.

Nominator: Click here to enter text.

Nominator contact email and phone: Click here to enter text.

This COVERSHEET is for identification purposes. The contact information will only be used by the HRC for internal communication purposes and will be removed from this form before distribution to the assessment panel.

The following template is provided as a guide to ensure the correct information regarding the nominee’s contribution to Māori health is obtained, in accordance with the intention and criteria of the HRC Te Tohu Rapuora Medal.

Please ensure you read the 2025 Te Tohu Rapuora call for nominations before completing this form.

Supporting evidence in support of the nomination may be submitted (no more than three A4 pages) in addition to this nomination form. This can be inserted at the bottom of this form or sent through as separate documents, along with the nomination form.

**Please begin your nomination on the next page.**

Nomination description (3-page limit, excluding cover page)

Click here to enter text. Use this field to provide information that is supplementary to the medal criteria below. If you do not have any additional information to input here, you can delete this part of the application.

**Contribution to advancing Māori health and/or knowledge**

Click here to enter text. Use this field to describe and provide evidence of the nominee’s contribution to advancing Māori health and/or knowledge.

**Partnerships with iwi/hapū, community, or other Māori health stakeholders**

Click here to enter text. Use this field to describe and provide evidence on how the nominee has partnered with iwi/hapū, community, or other Māori health stakeholders.

**Translation and dissemination of findings**

Click here to enter text. Use this field to describe and provide evidence on how the nominee has ensured the translation and dissemination of their findings to enhance the uptake and impact of their research.

**Demonstration of fostering capacity and capability of the Māori health research workforce**

Click here to enter text. Use this field to describe and provide evidence of the nominee’s demonstration of fostering capacity and capability of the Māori health research workforce.