IOWA PHYSICIAN ASSOCIATE SOCIETY
PA OF THE YEAR NOMINATION FORM

400 East Court Ave, Suite 126, IA 50309
515-750-2310 (Ext. 9) | Email: director@iapasociety.org

Qualifications: The candidate must be an IPAS member and serve the Iowa community. Please complete the information below and attach a document with a paragraph stating why you believe this person should be PA of the Year.

Nominator's Information

Name: _____

Address: _____

City: _____

Email: _____

Phone: _____

Nominee Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____

Place of Practice: _____

PA Program Nominee Graduated From: _____

Return by September 1, 2027

Michele Denkinger
Iowa Physician Associate Society
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Des Moines, IA 50309

Email: director@iapasociety.org