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**MALAYSIAN DIETITIANS’ ASSOCIATION**

**OUTSTANDING CLINICAL INSTRUCTOR AWARD**

1. **Objective**

To acknowledge outstanding Clinical Instructors (CI) in recognition of outstanding contribution as a role model for dietetic interns.

1. **Participating Institutions by Invitation**
   * Universiti Kebangsaan Malaysia (UKM)
   * Universiti Putra Malaysia (UPM)
   * Universiti Sains Malaysia (USM)
   * Universiti Teknologi Mara (UiTM)
   * Universiti Sultan Zainal Abidin (UNISZA)
   * International Islamic University Malaysia (IIUM)
   * International Medical University (IMU)
2. **Nomination and Award Presentation**

Nomination must submit the completed nomination form supported by all required documents by the dateline stated.

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| **No.** | **Steps** | **Dateline** |
| 3.1 | **Outstanding CLINICAL INSTRUCTOR AWARDS open for nomination** | 1st – 30th Apr |
| 3.2 | **Award, Scholarship and Grant (ASG) Committee receive and review nomination (see Eligibility Criteria)** | 1st – 15st May |
| 3.3 | **TFDE (Task Force on Dietetic Education) receive the compile nomination (with censored identifying information) from ASG and review nomination** | 15th – 31st May |
| 3.4 | **Award Ceremony**  3.5.1. The certificate will be given during award ceremony.  3.5.2. In case of absence of nominee to the award ceremony, the award will be sent to recipient’s address.  3.5.4. A congratulatory letter will be sent to winners’ institution from MDA.   |  |  |  | | --- | --- | --- | | **No.** | **Position** | **Award** | | 1 | MDA’s Outstanding Clinical Instructor  Award | RM1000 + Certificate | | Upcoming AGM / to be decided by council of the year |

1. **Eligibility Criteria** 
   1. The nominee shall be a current MDA Member of the year of nomination.
   2. The nominator shall be the dietetic intern of the university that the CIs are currently working.
   3. Each institution of higher learning can submit a maximum of **TWO (2)** candidates through the respective programme head/ programme coordinator with the following **supporting documents**:
      1. **Clinical Instructor Award Nomination Form**
      2. **At least THREE (3) written evidence from the dietetic interns that outline specific examples of how the nominee meets or exceeds the selection criteria.**
      3. **Evaluation from Lecturer and Peer**
2. **Nominee Qualities**

As the intent of the award is to honour outstanding CI for their contribution in teaching, leadership and mentoring of dietetic interns, nominees will be judged on the basis of the following **merit criteria**:

* 1. Consistently demonstrates excellence as a preceptor by creating an environment of learning that has resulted in meaningful learning experiences
  2. Acts as a role model by demonstrating outstanding competence and professionalism in the practice setting that meets dietetic standards of practice
  3. Actively and consistently demonstrates strong leadership, knowledge and a professional approach during interactions with the dietetic interns and colleagues.
  4. Demonstrates an ongoing willingness to precept students and facilitate learning using a creative, collaborative approach, setting evidence-based goals to meet objectives, monitoring progress and providing constructive on going evaluation to achieve student success
  5. Demonstrates a commitment to the relationship by recognizing the unique needs of each student and dedicates the necessary time to support and enhances the student learning experience.

1. **Nomination Submission**
   1. Application must be submitted via electronic mailer to the following email address by 5pm on **April 30th**.

**Email:** [**mda.awardsgrants@gmail.com**](mailto:mda.awardsgrants@gmail.com)

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**NOMINATION FORM**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **INSTITUTION** (Each institution can submit maximum of TWO names) | | | | | | | | |
| **INSTITUTION** | | **:** | |  | | | | |
| **PROGRAMME HEAD NAME** | | **:** | |  | | | | |
| **EMAIL** | | **:** | |  | |  |  |  |
| **CONTACT NO.** | **:** | |  | | | | | |
|  |  | |  | | | | | |
| **NOMINEE’S DETAIL** | | | | | | | | |
| **NAME** | | | **:** | |  | | | |
|  | | |  | | (Full name as it should appear on the certificate) | | | |
| **I.C. NO.** | | | **:** | |  | | | |
| **EMAIL** | | | **:** | |  | | | |
| **CONTACT NO.** | | | **:** | |  | | | |
|  | | |  | |  | | | |
| **............MDA AWARD, SCHOLARSHIP AND GRANT (ASG) COMMITTEE USE ONLY.................**   |  |  | | --- | --- | | **SUBMISSION CHECKLIST (Submit by April 30th)** | | |  | MDA Outstanding CI Nomination Form | |  | Nominee is currently an active member of MDA | |  | THREE supporting written evidence (from Dietetic Interns) are attached | |  | Email a soft copy to **mda.awardsgrants@gmail.com** |   **CODE OF NOMINEE** :  **/20\_ \_**  **RECEIVED BY**  :  **DATE** : | | | | | | | | |

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**WRITTEN EVIDENCES BY DIETETIC INTERNS**

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**To be filled up by Dietetic Interns of the respective university (attach additional pages as needed)**

1. *How did the Clinical Instructor inspire you to learn and grow into your role as a dietitian? How did he/she tailor the placement program to meet your educational needs?*
2. *How the Clinical Instructor was a role model of professional dietitian behaviour (for example as a teacher, mentor, resource person, research, evidence-based practice, etc.)*
3. *Tell a story about a way the Clinical Instructor demonstrated excellence as a preceptor.*

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**WRITTEN EVIDENCES BY DIETETIC INTERNS**

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**To be filled up by Lecturer and Peer of the respective university (attach additional pages as needed)**

1. Why do you think that this Clinical Instructor deserve the best CI awards?