



Creating excellence in eye & vision care through optometry education & regulation

### Educator of the year award

### **Contributions towards optometry education**

### **Eligibility Criteria:**

Minimum 3 years' experience with Masters in Optometry and OCI member in good standing for minimum 3 years.

#### Please submit A and B:

- A. Total number of years in teaching (5 points)
- B. Any degree /certifications / fellowship related to education: such as pedagogy workshop, evidence-based teaching etc. (10 points)

The nominee (including self) shall submit in not more than two printed A4 pages about his/her contributions in minimum 3 out of 5 points mentioned below:

- 1. Innovations in teaching practice or novel methods in education (15 points)
- 2. No of research papers published in peer reviewed journals as 1<sup>st</sup>, 2<sup>nd</sup> or corresponding author (10 points: First author, 5 points co-author up to third author)
- **3.** Student assessment and feedback of teaching (10 points: needs to be part of college or university feedback form)
- 4. Resource person at a conference/seminars/educational meetings (5 points)
- **5.** Please describe, why you should receive Educator of the Year Award (within 200 words) (10 points)

Along with submission of the duly filled form, please attach testimonials (2 Peers and 2 Students), pictures, videos, newspaper clips etc. and the recent resume of the nominee (including self)









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### **Details of the nominee** (including if nominating self)

Title		
Name of the nominee		
Organization		
Designation		
Mobile number		
Landline number		
E-mail		
Details of the person nominating (Not Applicable in case of Self Nomination)		

Title	
Name of the person	
nominating	
Organization	
Designation	
Mobile number	
Email ID	
Relationship with nominee	



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## **Educational Qualification of the nominee** (last three, beginning with highest qualification)

Degree	University	Year completed

**Professional History of the nominee** (beginning with current, last three assignments/positions held)

Organization	Position	Year Appointed	Location



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### **Reference letter** (Applicable in case of Self Nomination only)

Two reference letters, from referees indicating basis of their support for your own nomination, including your contribution in the 3(out of 5) areas chosen by you in the above list, has to be submitted. The referee cannot be a relative of the nominee. The referees should be familiar with the nominee's work.

### **Referee-1 contact details** (Applicable in case of Self Nomination only)

Title	
Name	
Designation	
J	
Organization	
Landline telephone number	
'	
Mobile number	
E-mail ID	
Relationship with nominee, if any	
(Supervisor/mentor/teacher/Guide/etc.)	
(Supervisor, mentor, teacher, durac, etc.)	

### **Referee-2 contact details** (Applicable in case of Self Nomination only)

Title	
Name	
Designation	



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### **Optometry Council of India**

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Organization Landline telephone number	
Mobile number	
E-mail ID	
Relationship with nominee, if any (Supervisor/mentor/teacher/Guide/etc.)	

### Disclaimer

- The jury members may contact the nominee/referee to confirm nomination.
- All the documents(testimonials) submitted should be self-attested

Kindly submit your nominations at <u>info@optometrycouncilofindia.org</u>. In case you want to send us hard copy please send to below address:

Optometry Council of India 5&6 Vasu complex RMV, 2<sup>nd</sup> Stage New BEL road Bangalore 560054



