



AAIM Member Spotlight Form

Nominee

First Name _____ Last Name _____

Organization _____

Phone _____ Email _____

☐ I am nominating myself

Nominator

First Name _____ Last Name _____

Email _____

Questions

How long have you been a member of AAIM? _____
What is your favorite part of your job? _____

How has the AAIM membership been of value to you and your career? _____

When did you know you wanted to pursue a career in the medical field? _____

What or who inspires you and why? _____

What advice would you give to those who wish to pursue a career in this industry? _____

What is your favorite book or movie? _____

☐ I would like to be interviewed for a member spotlight video

After submitting this form by email at spotlight@im.org, an email will be sent to the nominee notifying them about their AAIM Member Spotlight nomination and a request for a headshot.

The nominee's answers and headshot will be posted in AAIM Connection and on the Member Recognition page of our website at <https://www.im.org/members/member-recognition/member-spotlight>.

Don't delay, submit your spotlight today!