

# GOVERNOR'S VOLUNTEER SERVICE AWARD Nomination Form

2014

Administered by: NC Commission on Volunteerism and Community Service Office of Governor Pat McCrory



## 2014 GOVERNOR'S VOLUNTEER SERVICE AWARD NOMINATION GUIDELINES

#### **ELIGIBILITY**

- 1. Nominees must have been engaged in volunteer activities for a **minimum of one year in North Carolina** and benefited a community/communities in the state in a substantial, important or unique way.
- 2. Students receiving course credits for their volunteer activities are ineligible **unless** the nomination is based on volunteer service that extends beyond the course requirements, in which case it must be clearly indicated in the nomination statement.
- 3. National Service volunteers must be nominated for service above and beyond that which is required of them in their national service program.
- 4. Previous award recipients from within the past 10 years are ineligible.
- 5. Nominees in volunteer service categories are ineligible if they receive compensation for their service.
- 6. Director of Volunteers who receive compensation for their service must be nominated in the non-volunteer service category.
- 7. Nomination cannot be based upon court-mandated community service.
- 8. Nomination cannot be based upon serving as a "loaned executive."
- 9. Self-nominations are not allowable.
- 10. Family members may not nominate another family member for an award.
- 11. Group/team and corporate volunteerism nominations must be made by those external to the group/team or corporation/business.
- 12. Nomination submission requirements must be met.

#### **SUBMISSION REQUIREMENTS**

- 1. All nominations must be submitted on the 2014 Governor's Award for Volunteer Service nomination form.
- 2. ONLY COMPLETED NOMINATION FORMS WILL BE ACCEPTED.
- 3. **ALL REQUIRED SECTIONS OF THE NOMINATION FORM MUST BE COMPLETED.** The form consists of six sections and two supplemental pages.
- 4. **HANDWRITTEN FORMS WILL NOT BE ACCEPTED.** The nomination form must be typed (11-point font or larger).
- 5. Two references are **REQUIRED** for each nomination.
- 6. Nomination form attachments or supporting documentation (photographs, news articles, etc.) will not be accepted.
- 7. The deadline for county coordinators to submit their nomination packet to the Commission is Tuesday, December 31, 2013. County coordinators should establish a local deadline for accepting nominations to allow time for the local selection process and submittal to the Commission by the due date.

#### **AWARD SELECTION**

- Award selections are based on the nominee's volunteer efforts and commitment of time, accomplishments, community impact and enhancement of the lives of others, as described on the nomination form.
- Nominations are received and evaluated at the county level. The county may submit up to ten
  nominations for the Governor's Volunteer Service Award to the Commission to be considered for the
  Governor's Volunteer Service Award. One of the nominees may be recommended as a candidate for the
  Medallion Award, the state's highest level of volunteer recognition. The county may also recommend one
  non-volunteer (paid) Director of Volunteers to be considered for a Medallion Award.
- The Commission will select award recipients based on merit and eligibility. Recipients are selected without regard to race, religion, gender, national origin, or physical/mental disability.
- Nominations for the Governor's Medallion Award are reviewed and evaluated by a statewide review panel that determines the recipients of the award. The award is given to the state's top 20 volunteers and one paid Director of Volunteers.



## 2014 GOVERNOR'S VOLUNTEER SERVICE AWARD NOMINATION FORM

From County

#### SECTION 1 – NOMINATION CATEGORIES (COMPLETION REQUIRED)

## **VOLUNTEER SERVICE CATEGORIES** NOTE: The nominee may fit multiple categories. Please select ALL that apply to their service. **Individual:** An individual who volunteers. **Family:** A family that volunteers together on the same project(s). Group/Team: A group or team of two or more people that volunteer together on the same project(s) under a group or team name. **Youth:** A person (age 18 or younger) who volunteers. **Senior:** A person (age 55 or older) who volunteers. Mentor: An individual volunteer who has demonstrated an outstanding commitment to working with youth (ages 18 and younger) in a mentoring capacity and/or been actively engaged in other activities that support a mentoring program. Faith-Based: An individual, family, group/team, youth or senior that volunteers through a faith-based community organization. **Disaster:** An individual, family, group/team, youth or senior who volunteers in disaster preparedness, response, recovery or mitigation activities. (This does not include paid first responders.) National Service: An individual member of a National Service program (AmeriCorps, VISTA or Senior Corps) who has demonstrated outstanding volunteer service. The volunteer service must be above and beyond the requirements of the designated program. Corporate/Business: A corporation or business that has made a substantial impact in the community by promoting service to their employees through engaging in volunteer activities and/or by providing paid time for employees to volunteer for local organizations and/or agencies. Perseverance in Volunteerism: An individual volunteer who has overcome significant personal obstacles (mental and/or physical) in order to engage in service to others. Lifetime Achievement: An individual who has exhibited a lifelong commitment to volunteerism and community service. Nominees must have made a substantial and long-term sustained impact in the community as a result of their service efforts. NON-VOLUNTEER SERVICE CATEGORY **Director of Volunteers:** A paid staff member who exceeds expectations of good volunteer management skills including recruitment, training, coordination, risk management, evaluation, retention and recognition of volunteers. Other related job titles may include Volunteer Program Director or Manager of Volunteers.

## SECTION 2 – Nominee Information (COMPLETION REQUIRED) COMPLETE ONE BOX ONLY ON THIS PAGE

#### PLEASE COMPLETE THIS BOX FOR THE FOLLOWING CATEGORIES OF VOLUNTEER SERVICE:

Individual, Youth, Senior, Mentor, Faith-Based, National Service,
Perseverance in Volunteerism or Lifetime Achievement

Title: Ms. Mrs.				
Nominee's First Name				
Middle Name (if applicable	· —			
Last Name				
Suffix				
Home Address			<u> </u>	
City			Phone	
Email Address				
PLEASE COMPLET	E THIS BOX FOR THE FO	OLLOWING CAT	EGORIES OF VOLUNTE	ER SERVICE:
	Family, Group/Tea	m, or Corporat	ion/Business	
Family, Group/Team, or	· -		-	
Suffix (if applicable)			· · · · · · · · · · · · · · · · · · ·	
Contact's Title Ms.			Other	
Contact's First Name		<u></u>		
Contact's Last Name		<u></u>		
Suffix				
Address Line 1			<u> </u>	
		7in	Dhono	
City Email Address			_ Phone	
Elliali Address				
NOTE: If the family, group	•		•	<u>-</u>
above will accept the awar	d on behalf of the famil	y, group/team,	or corporation/busine	ess.
PLEASE COMPLETE	THIS BOX FOR NON-VO	DLUNTEER SERV	VICE IN THE FOLLOWI	NG CATEGORY:
	Director of Volui	nteers (paid sta	ff member)	
Title: Ms. Mrs.	Mr. Dr. Oth	er		
Nominee's First Name				
Middle Name (if applicabl		<u></u>		
Last Name				
Suffix:  Tr. Sr.	III Other	_		
Home Address				
City	State	Zip	Phone	
Email Address				
Agency/Organization (E	mployer)			
Auui C55				
City	State	Zip	Phone	
City	State	Zip	Phone	
City Supervisor's Name Email Address	State	Zip	Phone	

# SECTION 3 – Nominator and Reference Information (COMPLETION REQUIRED)

NOMINATOR			
Name		<u></u>	
<b>Relationship to Nominee</b> (i.e.	volunteer supervis	or)	
Address			
City	 State	Zip	
Phone			
	E		
Signaturo			Data
Signature			Date
REFERENCES – Two refer			
(those who are familiar with the i	nominee's voluntee	er service)	
PETEDENICE #1			
REFERENCE #1			
Name			
Relationship to Nominee			
Address			
			•
		7:	
City	State	ZIP	
Phone	Email Address		
Signature			Date
		~AND~	
REFERENCE #2			
Name			
Relationship to Nominee			
Address			
			•
City			
Phone	Email Address	s	
Signature			Date

# SECTION 4 – Organization Information (COMPLETION REQUIRED)

Organization(s) served by nominee.  Please focus on the service for the past year only — except for lifetime achievement nominees.	
ORGANIZATION #1	
Organization Name Volunteer Job Title(s) Dates of Service  Total length of time nominee has served this organization Nominee's typical frequency and duration of service (example-5 hours per day for 3 days each week)	
Nominee's primary volunteer duties	
*If nominee has served at more than one organization this year, please complete the supplemental page of this nomination form.	
SECTION 5 – Nomination Statement	
(COMPLETION REQUIRED)	
Please explain the main reasons this nominee is being nominated.  Please focus on the service for the past year only – except for lifetime achievement nominees.	
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## SECTION 6 – Description of Exemplary Service (COMPLETION REQUIRED)

Every volunteer is worthy of recognition. Please summarize the nominee's exemplary service and describe below what distinguishes this nominee's efforts from those of other volunteers.

Please focus on the service for the past year only – except for lifetime achievement nominees.

Please describe the nominee's outstanding commitment to volunteerism and the agency or organization they have served.
organization they have believed
Please describe the nominee's outstanding accomplishments and how the impact of their service has helped to meet critical needs in their community.
Please describe the nominee's special skills, qualities and/or leadership qualities.

### **SUPPLEMENTAL PAGE – Additional Organizations Served by Nominee**

\*Except for lifetime achievement nominees, please focus on this past year of service only.

Nominee Name:	County
ORGANIZATION #2	
Organization Name	
Volunteer Job Title(s)	
Dates of Service	
Total length of time nominee has served this organization	
Nominee's typical frequency and duration of service (6	example-5 hours per day for 3 days each week)
Nominee's primary volunteer duties	
ORGANIZATION 3	
Organization Name	
Volunteer Job Title(s)	
Dates of Service	
Total length of time nominee has served this organization	
Nominee's typical frequency and duration of service (6	example-5 hours per day for 3 days each week)
<del></del>	
Nominee's primary volunteer duties	
ORGANIZATION 4	
Organization Name	
Volunteer Job Title(s)	
Dates of Service	
Total length of time nominee has served this organization	
Nominee's typical frequency and duration of service (e	example-5 nours per day for 3 days each week)
Nominee's primary volunteer duties	

### **SUPPLEMENTAL PAGE – Family Volunteerism**

\*NOTE: This page should be completed only for Family Volunteering nominees

ninee Name:	County
Family Member 2	
Title: Ms. Mrs. Mr. First Name	
Middle Name (if applicable)	
Last Name Suffix (if applicable) Jr Sr.	
Suffix (if applicable) Jr Sr.	Otner
Family Member 3	
Title: Ms. Mrs. Mr. First Name	
Middle Name (if applicable)	
· · · · /	
Last Name Jr Sr.	☐ III ☐ Other
Family Member 4	
Title: Ms. Mrs. Mr.	
First Name	
Middle Name (if applicable)	
Last Name	
Suffix (if applicable)	☐ III ☐ Other
Family Member 5	
Title: Ms. Mrs. Mrr.	Dr. Other
First Name	
Middle Name (it applicable)	
Middle Name (if applicable)	
Last Name	Other
	☐ III ☐ Other
Last Name	☐ III ☐ Other
Last Name	☐ III ☐ Other
Last Name Suffix (if applicable) Jr Sr.	
Last Name Suffix (if applicable)	
Last Name Suffix (if applicable)	
Last Name Suffix (if applicable)	Dr. Dther