GOVERNOR’S AWARD
FOR VOLUNTEER SERVICE

2010
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NOMINATION GUIDELINES

ELIGIBILITY

• Nominees must be an individual, family, group, or business whose volunteer activities in North Carolina have benefited a community or communities in North Carolina in a substantial, important or unique way.
• Students receiving course credits for their volunteer activities are ineligible unless the nomination is based upon volunteer service that extends beyond the course requirements, in which case it must be clearly indicated in the nomination statement.
• Previous winners from within the past 10 years are ineligible.
• Those who received compensation for their service are ineligible with the exception of Directors of Volunteers.
• Nomination cannot be based upon court-mandated community service.
• Nomination cannot be based upon serving as a “loaned executive.”
• Self-nominations are not permissible.
• Nominations cannot come from family members.
• Group and business nominations must be made by those external to the group or business.
• Nomination paperwork submission requirements must be met.

SUBMISSION REQUIREMENTS

• All nominations must be submitted on the official 2010 Governor’s Award for Volunteer Service nomination form.
• The nomination form consists of five sections. All sections of the nomination form must be completed.
• The nomination form must be typed or handwritten in print-style.
• Each county may submit a maximum of five nominees to the NC Commission on Volunteerism through the local County Coordinator.
• Of the nominees from each county, each of the five must be from separate nomination categories.
• One of the five nominees may also be identified by the County Coordinator as a nominee for the Medallion Award.
• The NC Commission on Volunteerism and Community Service will evaluate nominees based upon the contents of the nomination form only. Please do not include additional materials such as photographs and videos.
• Recipients of the Governor’s Award for Volunteer Service and the Medallion Award are selected based on merit – without regard to race, religion, gender, national origin, or physical/mental disability.
• The deadline to submit all nomination forms to the Commission is August 27th, 2010.

AWARD SELECTION

The selection of each county’s five nominees is conducted at the local (County) level and submitted to the NC Commission on Volunteerism and Community Service for approval. Selection is based upon the nominee’s volunteer efforts, accomplishments, and impact. The nomination should reflect a meaningful commitment of time and service by the nominee. The nominee’s service should address a community need and/or enhance the quality of life of North Carolinians and demonstrate acts of generosity and kindness. A statewide panel, under the direction of the NC Commission on Volunteerism and Community Service, will evaluate the nominations for the Medallion Award.
NOMINATION FORM

From _________________ County

SECTION 1 - Completion Required

Nomination Category:

* Although your nominee may fit multiple categories, please select only one.

☐ Individual: An individual volunteer.

☐ Family: A family that volunteers together on the same project(s).

☐ Group: A group of three or more people that volunteer together on the same project(s) under a group name.

☐ Youth Volunteer: A youth (age 18 or younger) volunteer.

☐ Senior Volunteer: A person who is 55 or better, and volunteers.

☐ Perseverance in Volunteerism: An individual volunteer who has overcome significant personal obstacles (mental or physical) in order to engage in service to others.

☐ National Service: An individual member of a National Service program (AmeriCorps, AmeriCorps VISTA, AmeriCorps NCCC or Senior Corps) who have demonstrated outstanding volunteer service above and beyond the requirements of the designated program.

☐ Outstanding Mentor: An individual volunteer who has demonstrated a commitment to working with children (ages 18 and younger) in a mentoring capacity and/or been actively involved in the mobilization of volunteers, groups and resources that support a mentoring program.

☐ Faith-Based Volunteerism: An individual or group that volunteers through a faith-based community organization. Nominees may serve either members of or those outside the service-sponsoring faith community.

☐ Corporate Volunteerism: A business that has made a substantial impact through innovation, volunteer hours, number of volunteers, and/or other means.

☐ Director of Volunteers: A paid staff member who exemplifies good management skills in volunteer training, risk management, screening, recognition, evaluation and retention of volunteers (e.g. Director of Volunteers, Manager of Volunteers, or other related titles).

☐ Lifetime Achievement: An individual who has exhibited a lifelong commitment to volunteerism and community service. Nominees must have made a substantial and sustained impact in the community as a result of their service efforts.
SECTION 2 - Completion Required

Nominee Name:

Individual/Family (Complete if nominee is an individual or family)

The nominee is: ☐ an individual   ☐ a family with ____ members nominated (e.g. 2, 3, 4)

Title: ☐ Ms. ☐ Mrs. ☐ Mr. ☐ Dr. ☐ Other: ______________________________

First Name: ____________________________________________________________

Middle Name (if applicable): _____________________________________________

Last Name: _____________________________________________________________

Suffix (if applicable): ☐ Jr. ☐ Sr. ☐ III ☐ Other: __________________________

*If you are nominating a family, please complete the supplemental page for each family member included in the nomination.

~OR~

Group/Business (Complete if nominee is a group or business)

Group/Business Name (e.g. The Smith Elementary Volunteers): __________________________

Suffix (if applicable): ☐ Co. ☐ Inc. ☐ LLC ☐ Other: ____________________________

Contact Person:

Title: ☐ Ms. ☐ Mrs. ☐ Mr. ☐ Dr. ☐ Other: ________________________________

First Name: ____________________________________________________________

Middle Name (if applicable): _____________________________________________

Last Name: _____________________________________________________________

Suffix: ☐ Jr. ☐ Sr. ☐ III ☐ Other: _________________________________

Nominee Contact Information:

*Please use the home address for an individual or a family.
*Please use the contact person’s address for a group or business.

Address Line 1: __________________________________________________________

Address Line 2 (if applicable): _____________________________________________

Address Line 3 (if applicable): _____________________________________________

City: ____________________________________  State: ______  Zip: __________

Phone: ________________________________  E-mail: ______________________

Nominator Information:

Name: ________________________________________________________________

Relationship to Nominee (e.g. Volunteer Supervisor): _______________________

Address Line 1: _______________________________________________________

Address Line 2 (if applicable): _____________________________________________

Address Line 3 (if applicable): _____________________________________________

City: ____________________________________  State: ______  Zip: __________

Phone: ________________________________  E-mail: ______________________

Signature: ___________________________________________________________________

Reference Information:

*Reference must be familiar with nominee's volunteer service.

Name: ________________________________________________________________

Relationship to Nominee: ________________________________________________

Address Line 1: _______________________________________________________

Address Line 2 (if applicable): _____________________________________________

Address Line 3 (if applicable): _____________________________________________

City: ____________________________________  State: ______  Zip: __________

Phone: ________________________________  E-mail: ______________________
SECTION 3 - Completion Required

Organization(s) where nominee served:

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

**Organization 1**

<table>
<thead>
<tr>
<th>Organization Name:</th>
<th>______________________________________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Volunteer position title(s):</td>
<td>___________________________________________________</td>
</tr>
<tr>
<td>Dates of Service:</td>
<td>___________________________________________________</td>
</tr>
</tbody>
</table>

**Total Length of time nominee has served this organization:**

**Nominee’s typical frequency and duration of service:** (e.g. 5 hours per day for 3 days each week): ______________________________________________________

**Nominee’s primary volunteer duties:** ______________________________________________________

*If nominee has served at more than one organization please complete the supplemental page for each organization.

SECTION 4 - Completion Required

Nomination Statement:

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

Please explain the main reasons this individual, family, group, or business is being nominated: ______________________________________________________

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Every volunteer is worthy of recognition, however, what distinguishes the nominee from others? Please summarize the nominee’s exemplary service and what distinguishes this nominee’s efforts from other volunteers by answering the following:

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

Describe the nominee’s outstanding commitment to volunteerism and the agency(ies) or organization(s) they have served: ____________________________
_______________________________________________________________________
_______________________________________________________________________
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Describe the nominee’s outstanding accomplishments and the impact of their service and commitment to their agency(ies) or organization(s): ________________
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Describe the nominee’s special skills, qualities, and/or leadership: __________
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Organization(s) where nominee served:

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

**Organization 2**

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Family Nomination Supplemental Page

Nominee Name:

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