



2017 Governor's Outstanding Volunteer Service Awards Nomination Form

**Nomination Deadline
Friday, August 11, 2017**

Nominations received after this date will not be accepted

Winners will be notified in September
The awards ceremony will be held October 25, 2017

If you would like your nomination reviewed before final submission, email it to:
dhss_VolunteerDelaware@state.de.us

**Sponsored by:
Governor John Carney**

Mail Completed Forms To:
Governor's Outstanding Volunteer Awards
c/o April Willey
State Office of Volunteerism
Williams State Service Center
805 River Road
Dover, DE 19901



You may also email your forms to:
dhss_VolunteerDelaware@state.de.us

Questions?

Call April Willey at 302-857-5006

ELIGIBILITY/SUPPLEMENTAL INFORMATION

- Any individual, group organization or business engaged in volunteer activities that address community needs within the State of Delaware is eligible for nomination.
- Individuals and groups must be engaged in volunteer activities addressing community needs within the State of Delaware.
- Nominee cannot receive employment compensation.
- Eligible nominees include individuals or youth groups where participants are 18 years old or older.
- Individual nominees must have volunteered at least 100 hours and groups 250 hours.
- Nominees may not nominate themselves or be nominated by a family member.
- Previous winners (individuals or groups) of any 2014, 2015 or 2016 Governor's Volunteer Awards (Youth or Adult) are not eligible for the 2017 Governor's Volunteer Service Awards. State Office of Volunteerism staff, family members, commissioners and commissioner's family members are not eligible.
- Nominees must have volunteered the hours during the 2016 calendar year (January 1st - December 31st). Nominator may include additional/supplemental information about consistent, long-term volunteer service that extends over a number of years.
- Service may not be limited to partisan political involvement or religious activities, or solely for the benefit of an organization's own membership.
- Nominees selected as award winners will be recognized through the press and at an awards ceremony to be held in October.
- Nominees' names, photos and nominator contact information become property of the State Office of Volunteerism and available for use to media sources and through the various State of Delaware social media sites, unless the State Office of Volunteerism receives written notification stating otherwise.

AWARD CATEGORIES - CHOOSE FROM ONE OF THE FOLLOWING CATEGORIES

- **Paul Wilkinson Lifetime Achievement Award** – This award is to recognize an individual who has served 20+ years and made a substantial impact through long-standing service to their community.
- **Arts/Culture** – Museums, performing arts, historical sites and programs, ethnic and cultural exploration or education programs; awareness and education for the arts.
- **Community Service** – Volunteer service to improve or revitalize a neighborhood or community as a whole.
- **Economic Opportunity** - Addresses unmet needs of economically disadvantaged individuals, including financial literacy, affordable housing, and employment-related assistance.
- **Education/Literacy** – School or community-based learning programs; early childhood development and educational assistance at all levels related to unmet educational needs within communities, especially those that help at-risk youth to achieve success in school and prevent them from dropping out.
- **Environment** – Planning or implementation efforts; education; public awareness; protection or enhancement regarding energy and water efficiency, renewable energy use, at-risk ecosystems, and behavioral change leading to increased efficiency.
- **Health & Special Needs** – Service providing physical and/or mental health care; substance abuse prevention and/or rehabilitation.
- **Healthy Futures** - Addresses unmet health needs, including access to health care, increasing physical activity and improving nutrition in youth, and increasing seniors' ability to remain in their own homes.
- **Human Needs** – Job training and placement; child care; youth and community recreation; services to the elderly; services to people with disabilities; services to families and/or children; assistance to homeless and/or indigent persons/families; housing and short-term crisis; social services.
- **Public Safety** – Assistance to victims of crime; public awareness and prevention programs; criminal rehabilitation; crisis intervention; disaster preparedness; firefighting and emergency medicine.
- **Social Justice/Advocacy** – Efforts to bring together diverse groups within the community to address community issues, needs, or to promote equity and justice.
- **Veterans & Military Families** - Addresses unmet needs of veterans, members of the armed forces, and family members of deployed military personnel.

A COMPLETE NOMINATION PACKET CONSISTS OF:

- A completed nomination form which is page four (4) of this packet.
- A narrative (**300 words or less per question**) addressing each question (1 thru 5) listed below.
 - **Each question should be answered individually** and be neatly printed or typed.
 - If nominee has been active in a number of organizations and or has done a variety of activities for one organization, please list ALL pertinent activities/organizations in this narrative.
- If nominating a group, include a **list with each member's name and his or her group name(s)**.
- Supplemental materials may be included but may not exceed five pages.
 - Examples include letters of recommendation, testimonials, news clippings, etc.
 - These inclusions should be on activities included in the narrative, but can expound on a single effort if the nominee does multiple activities.
 - Materials must be no larger than 8.5" X 11" Please do not submit tapes, display materials, scrapbooks, etc.

TAKE NOTE:

- Type in 12 pt. font or neatly print the information.
- All materials and photos submitted become the property of the State Office of Volunteerism and will **not** be returned.
- A **high quality color digital photograph** of the nominee, suitable for publication will be requested, if chosen as a winner.
- Nominees' names, photos and nominator contact information become property of the State Office of Volunteerism and available for use to media sources and through the various State of Delaware social media sites, unless the State Office of Volunteerism receives written notification stating otherwise.

NARRATIVE QUESTIONS: MAKE SURE YOU ANSWER ALL FIVE QUESTIONS

TAKE NOTE: 300 Words or less for each question

1. Describe the volunteer activity or service offered.
2. Describe the scope/range of volunteer activity (the number and variety of tasks that are part of the volunteer effort) and the impact it made. Has the volunteer: played multiple roles in the same organization; served in a number of organizations; affected how many people; what geographic areas by the service(s). If nominee has provided consistent volunteer service to project(s) over an extended number of years, please include details.
3. Detail the quality of the nominee's volunteer activity; e.g., done completely, well, and on time; how did it help to meet community needs and the impact it had.
4. Describe the demonstration of leadership and/or innovation demonstrated within the organization or community.
5. Describe the nominee's commitment to service, e.g., number of people served, length of time served, indicate if he or she served the minimum requirement of 100 hours as an individual or the minimum of 250 hours as a group during the nomination year. **Make sure to include TOTAL number of hours.**

NOMINATION FORM

Please put this as the first page of your nomination packet.
You may submit your packet via email to: dhss_VolunteerDelaware@state.de.us

A. NOMINEE(S)

Please check one: Individual or Group

Name of Individual or Group Being Nominated:

Day Phone _____ Evening _____

Address _____

City _____ ZIP _____

County _____

Email _____

B. NOMINATOR

Name _____

Day Phone _____ Evening _____

Title and Organization (if applicable) _____

Address _____

City _____ ZIP _____

Email _____

NOTE: If the person nominating is not the group contact, please complete the section below with the group contact information:

Name _____

Day Phone _____

Evening Phone _____

Email _____

C. NOMINEE (Check one)

- Individual
- Group (include names of all group members on a separate sheet of paper)

D. ISSUE CATEGORY (Check only one)

- | | | |
|---|--|--|
| <input type="radio"/> Paul Wilkinson Lifetime Achievement Award | <input type="radio"/> Education/Literacy | <input type="radio"/> Human Needs |
| <input type="radio"/> Arts/Culture | <input type="radio"/> Environment | <input type="radio"/> Public Safety |
| <input type="radio"/> Community Service | <input type="radio"/> Health & Special Needs | <input type="radio"/> Social Justice/Advocacy |
| <input type="radio"/> Economic Development | <input type="radio"/> Healthy Futures | <input type="radio"/> Veterans & Military Families |

E. References:

List three (3) references who are familiar with the accomplishments of the nominee. They may not be family members.

1. Name _____ Phone _____ Email _____

2. Name _____ Phone _____ Email _____

3. Name _____ Phone _____ Email _____