



# PRIDE Volunteer of the Month Nomination Form

Date: \_\_\_\_\_

## About the Nominee

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Organization Where Volunteer Service Was Performed (and position, if applicable):**

(Paid employees are not eligible for consideration unless service is well above and beyond the description of their regular duties.)

\_\_\_\_\_

**Description of nominated service:** (Describe in detail the service you feel is noteworthy.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Period of Service:** \_\_\_\_\_ to \_\_\_\_\_

(Need not be limited to month nominated.)

**Volunteer Hours:** \_\_\_\_\_

(If recorded)

**Related or Other Volunteer Service:** (List actions or endeavors that show a pattern of volunteerism. This program recognizes individuals who routinely "give back" to their communities.)

\_\_\_\_\_

\_\_\_\_\_

**Other Pertinent Information:** (Any other information you feel strengthens your nomination and introduces your nominee.)

\_\_\_\_\_

\_\_\_\_\_

**Place of Work and Job Title (if applicable):** \_\_\_\_\_

## About the Person Submitting the Nomination

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Signature: \_\_\_\_\_