

Community Volunteer Impact Award Nomination Form

NOMINEE Information

Title (Mr, Mrs, Ms,): _____

Name: (First) _____ (Last) _____

Address: _____

City: _____ Postal Code: _____

Phone: (Home): _____ (Cell): _____

E-mail(print): _____

NOMINATOR Information

Title (Mr, Mrs, Ms,): _____

Name: (First) _____ (Last) _____

Address: _____

City: _____ Postal Code: _____

Phone: (Home): _____ (Cell): _____

E-mail(print): _____

Relationship to Nominee: _____

Nominator Signature: _____

List Organization(s) or Event(s) the Nominee has Supported.

Please list two references:

1) Name: _____ Contact Phone Number _____
Relationship to Nominee: _____

2) Name: _____ Contact Phone Number _____
Relationship to Nominee: _____

Describe the nominee’s achievement and contributions to our community as they relate to Community Impact as a volunteer.

Please comment on: (Attach additional sheets to answer these, if required)

Commitment-tell what makes this nominee invaluable and unique in the volunteer work they do.

Impact-tell what difference this nominee has made in our community and who has benefited directly or indirectly.

Inspiration-tell how this nominee has been creative in the volunteer work they do and how they have motivated others.

****Please submit these 2 pages by midnight Wed, April 12th, to the Volunteer Centre of St. Lawrence-Rideau by email at manager@volunteercentre.ca or by fax at 613 498 2116 or drop off at our office at 105 Strowger Blvd, Brockville ON.**