



Serve Washington

Changing Communities. Changing Lives.

Governor's Volunteer Service Awards 2017 Nomination Form and Guidelines

Serve Washington, the bipartisan, Governor-appointed commission on national and community service presents "Governor's Volunteer Service Awards." These awards recognize individual volunteers and volunteer programs through a statewide award program to highlight the importance of volunteerism and community service in the state of Washington.

One Individual, National Service, and Group award will be presented in each of the following categories:

Individual Awards:

AmeriCorps Alum	Education	Human Services
Animal Welfare	Employee Volunteer	Social Services
Citizen Corps/CERT Volunteer	Environment	Veteran
Disaster/Emergency Response	Healthcare	Youth (18 & under)

National Service Awards:

AmeriCorps Member	Foster Grandparent Program	Senior Companion Program
VISTA Volunteer	RSVP	

Group Awards:

- Employer-Based Program
- Service Group
- Volunteer Family

A panel of judges comprised of Governor-appointed commission members, will select the award recipients. Nominations will be accepted until **February 9, 2017** by **5:00 PM PST** at the address below. The recipients will be notified the week of **March 13, 2017**.

Serve Washington will host a ceremony at the Executive Mansion in Olympia to honor the 13th Annual Governor's Volunteer Service Award recipients on **April 11, 2017**.

We will seek the assistance of the nominator to provide a quality photo of the nominee to Serve Washington upon notification of selection.

How to submit your nomination: Complete the online nomination form available at: <https://www.surveymonkey.com/r/GVSA-Nomination>. Questions and requests to receive in alternate format should be sent to: servewa@ofm.wa.gov or 360-902-0657.



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Eligibility Guidelines:

- Volunteers may be nominated by an individual or organization.
- Focus on volunteer service for the past calendar year only.
- Volunteer service must be performed in Washington and may not include hours served as part of academic credit or court-ordered community service.
- Nominee's volunteer organization must serve the community at large (not limited to its own members).
- The nomination statement must be limited to the word count provided **(500 words in total)**.
- In the event multiple nominations are received for the same individual in multiple categories, the nominee is only eligible to receive one award.
- Serve Washington reserves the right to withhold distribution of an award if deemed appropriate.
- Only a current member or participant of a national service program in Washington (e.g. AmeriCorps, AmeriCorps VISTA, AmeriCorps NCCC, or Senior Corps programs such as RSVP, FGP, and SCP) is eligible for the National Service Awards category. Alternatively, they may be nominated in one of the other award categories as appropriate.
- Serve Washington staff and commission members are not eligible to receive an award, or to nominate volunteers for awards.
- Entries are received in confidence, are scored by a team of commission members, and become the property of Serve Washington.
- Please do not submit any attachments, videos, news clips, etc., unless requested by Serve Washington. However, you may submit one photo of your nominee in action via email to servewa@ofm.wa.gov and include the first and last name in the subject line.

Award Selection:

- Award selections are based on the nominee's volunteer efforts, commitment of time, accomplishments, community impact and enhancement of the lives of others, as described in the nomination statement. The elements of the statement include:
 - Nominee's outstanding commitment to volunteerism.
 - Nominee's commitment to the agency or organization they have served.
 - Nominee's outstanding accomplishments.
 - How the impact of their service has helped meet critical needs in their community.
- Serve Washington will select award recipients based on merit and eligibility.
- Serve Washington may use discretion to move an individual or group into a different category if deemed appropriate.

Serve Washington strives to be a model of inclusion by supporting programs that bring diverse individuals and perspectives together to serve our state. Through the Governor's Volunteer Service Awards we strive to recognize a diversity of individuals and groups for their contributions toward effectively addressing the issues that face our communities.



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1. **AmeriCorps Alum:** an individual who served in AmeriCorps or VISTA who has demonstrated outstanding volunteer service that continued following their term of service.
2. **Animal Welfare:** an individual serving to alleviate suffering inflicted on animals by people.
3. **Citizen Corps/CERT:** an individual who volunteers with a Citizen Corps program or Community Emergency Response Team (CERT).
4. **Disaster or Emergency Response:** an individual who volunteers in disaster preparedness, response, recovery or mitigation activities. (This does not include paid first responders).
5. **Education:** an individual who volunteers in the K-12 education system.
6. **Employee Volunteer:** an individual serving through their company/organization who provides exemplary unpaid service to the community.
7. **Environment:** an individual who volunteers on environmental issues.
8. **Healthcare:** an individual who volunteers in a healthcare institution and/or for healthcare issues.
9. **Human Services:** an individual's action which serves to assist others in navigating through crisis or chronic situations.
10. **Social Services:** an individual serving to build stronger communities, promote equality, social justice and/or opportunity.
11. **Veteran:** a former member of the armed forces who volunteers serving veterans.
12. **Youth** (18 and under)
13. **AmeriCorps Member:** an individual serving a term in AmeriCorps who has demonstrated outstanding volunteer service. The volunteer service must be above and beyond the requirements of the designated program.
14. **AmeriCorps VISTA:** an individual serving a term in VISTA who has demonstrated outstanding volunteer service. The volunteer service must be above and beyond the requirements of the designated program.
15. **Foster Grandparent Program:** an individual serving in the Foster Grandparent Program who has demonstrated outstanding volunteer service. The volunteer service must be above and beyond the requirements of the designated program.
16. **RSVP:** an individual serving in the Retired and Senior Volunteer Program (RSVP) who has demonstrated outstanding volunteer service. The volunteer service must be above and beyond the requirements of the designated program.
17. **Senior Companion Program:** an individual serving in the Senior Companion Program who has demonstrated outstanding volunteer service. The volunteer service must be above and beyond the requirements of the designated program.
18. **Employer-Based Program:** A program that promotes and supports volunteerism at an organization, business or corporation.
19. **Service Group:** A group of volunteers (faith-based, civic, leadership, etc.) meeting the needs of the community by providing service to the community at large.
20. **Volunteer Family:** A family that volunteers together on the same project(s).



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Nomination Form Sample

(Nominator must ensure all requirements for nomination are met)

Nominee Information:

(Note: The online form has separate fields for individual, group, and family nominees. Provide primary contact person for group and family nominations. Group has Group Name field. Family nomination has added fields to list members-see supplemental page.)

Name: _____ Group Name: _____
(if applicable)

Address: _____ City/State/Zip: _____

Phone: _____ E-mail: _____

The following information is used to compile demographic data of volunteers and is optional, except for age if Youth nominee.

Age: _____ Gender: _____ Ethnicity: _____

Volunteer Position Title: _____

Organization Served by Nominee:

Organization: _____

Address: _____ City/State/Zip: _____

E-mail: _____ Phone: _____

Are you the immediate supervisor of the volunteer being nominated? Yes ___ No ___

*If no, provide name of nominee's immediate supervisor for volunteer activities: _____

*If no, what is your relationship with the nominee? _____

Select one award category in which the nominee's volunteer service most closely aligns:

- | | | |
|--|---|---|
| <input type="checkbox"/> AmeriCorps Alum | <input type="checkbox"/> Healthcare | <input type="checkbox"/> Foster Grandparent Program |
| <input type="checkbox"/> Animal Welfare | <input type="checkbox"/> Human Services | <input type="checkbox"/> RSVP |
| <input type="checkbox"/> Citizen Corps/CERT | <input type="checkbox"/> Social Services | <input type="checkbox"/> Senior Companion Program |
| <input type="checkbox"/> Disaster/Emergency Response | <input type="checkbox"/> Veteran | <input type="checkbox"/> Employer-Based Program |
| <input type="checkbox"/> Education | <input type="checkbox"/> Youth (18 & Under) | <input type="checkbox"/> Service Group |
| <input type="checkbox"/> Employee Volunteer | <input type="checkbox"/> AmeriCorps Member | <input type="checkbox"/> Volunteer Family |
| <input type="checkbox"/> Environment | <input type="checkbox"/> AmeriCorps VISTA | |

Nominator Information:

Name: _____ Organization: _____

Address: _____ City/State/Zip: _____

E-mail: _____ Phone: _____



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Nomination Statement – Statements should be written in third person. Ensure all elements of the information requested are addressed in the nomination statement. There is a **500 word limit in total for all elements combined**. The word count within each element can be determined by the author. Exceeding the total word limit will cause disqualification. It is highly recommended to draft the statement in a Word document to view word count, then copy and paste in online form.

Elements:

- 1) Explain the primary reason this nominee is being nominated.**
- 2) Describe the nominee's outstanding commitment to volunteerism.**
- 3) Describe the nominee's commitment to the agency or organization they have served.**
- 4) Describe the nominee's outstanding accomplishments.**
- 5) Describe how the impact of their service has helped meet critical needs in their community.**



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SUPPLEMENTAL PAGE -Volunteer Family

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

Nominee Name: _____

Family Member #2

First Name _____
Last Name _____

The following information is used to compile demographic data of volunteers and is optional, except for age if under 18.

Age: _____ Gender: _____ Ethnicity: _____

Family Member #3

First Name _____
Last Name _____

The following information is used to compile demographic data of volunteers and is optional, except for age if under 18.

Age: _____ Gender: _____ Ethnicity: _____

Family Member #4

First Name _____
Last Name _____

The following information is used to compile demographic data of volunteers and is optional, except for age if under 18.

Age: _____ Gender: _____ Ethnicity: _____

Family Member #5

First Name _____
Last Name _____

The following information is used to compile demographic data of volunteers and is optional, except for age if under 18.

Age: _____ Gender: _____ Ethnicity: _____

Family Member #6

First Name _____
Last Name _____

The following information is used to compile demographic data of volunteers and is optional, except for age if under 18.

Age: _____ Gender: _____ Ethnicity: _____