

CELEBRATE VOLUNTEERISM

32nd Annual WGAL Jefferson Awards

Sponsored by WGAL 8, PSECU, and the United Ways of:

Adams County, Capital Region, Carlisle & Cumberland County,
Lancaster County, Lebanon County, and York County

OFFICIAL NOMINATION FORM

The 2011 Jefferson Awards seek to recognize and reward local citizens for outstanding public service.

DEADLINE: Must be postmarked by August 20, 2010

Name of Individual Nominated: _____

Nominee's Address: Street _____

City _____ State _____ Zip _____

Phone _____

This allows us to contact him/her if necessary.

*County _____

E-mail Address _____

Do you have a relative, friend or co-worker who is performing extraordinary personal acts and impacting the local community as a result? In 500 words or less, describe the activities and contributions which make you think this is the person deserving of such a prestigious recognition, the *Jefferson Award For Public Service*. Assume the judges know nothing about the nominee and/or the work they do; tell the story as you would to a stranger.

Convey what distinguishes him/her as an individual, and then highlight how the nominee's actions benefit the lives of others and the local community. (Please use another sheet of paper for your comments.)

BE SURE TO INCLUDE THE FOLLOWING INFORMATION:

- The number of hours your nominee volunteers per month (estimate if not known).
- The name(s) of the organizations.
- How long your nominee has volunteered; please supply dates if you know them.
- What has changed/been impacted within the community as a result of your nominee's call to service?

ALSO, PLEASE REMEMBER:

- Fill out this nomination form COMPLETELY.
- Type or print in ink. Remember, others have to read your work.
- Do not send photographs; they will not be given to the judges or returned.
- Do not staple your nomination form to any additional forms submitted.
- Bullet points are encouraged.
- Your nominee must be an individual. If nominating a couple or group, a separate nomination form must be filled out for each person.
- No posthumous selections will be made.

Your Name: _____

Your Address: Street _____

City _____ State _____ Zip _____

Phone _____

This allows us to contact you if necessary.

E-mail Address _____

*Note: Nominator must give his or her name to validate entry. To keep your name confidential, check here ().

Mail to: WGAL Jefferson Awards, c/o Heather Bruce
1300 Columbia Avenue, P.O. Box 7127
Lancaster, PA 17604-7127



This nomination form must be used for all entries.
Finalists are subject to a background check.

