

Farmington Area Commission On Aging Volunteer Award Nomination Form 2015

*Nominees 50 & better will be considered for the Gold Award,
75 & better for the Margaret Loidas Diamond Award.*

Submission Deadline February 20, 2015

**CRITERIA: Farmington or Farmington Hills resident,
50 years old or better, currently an active volunteer.**

**Please describe each volunteer activity for proper
award consideration. Please print. If more space
is needed, attach a separate sheet.**

Nominator _____

Address _____

City/Zip _____

Phone _____

Email _____

Relationship to nominee _____

NOMINEE

Name: _____

Address: _____

City: _____

MI

Zip: _____

Telephone: _____

Email: _____

Age*: _____

**Please describe the nominee's volunteer service by the organization(s) he/she served in the
spaces below.**

Organization 1

Name of Organization _____ Phone _____

Address _____

Length of Nominee's Service: ____ years ____ months

Frequency of Service: _____ hours per month

Description of service: Describe what service the nominee provided, how the nominee is
involved in the organization, and the results of the nominee's service.

Organization 2

Name of Organization _____ Phone _____

Address _____

Length of Service: ____ years ____ months

Frequency of Service: _____ hours per month

Description of service: Describe what service the nominee provided, how the nominee is involved in the organization, and the results of the nominee's service.

Use this space to describe anything extraordinary about the nominee's service: Include what is inspiring, courageous, unusual or innovative about the nominee's service.