SCHOHARIE COUNTY
OFFICE FOR THE AGING

SENIOR CITIZEN'S DAY 2016
NOMINATION FORM

Recognizing Older New Yorkers Who Demonstrate The Power Of Making A Difference In Their Community Through Volunteerism!

Due by Monday, January 25th, 2016

Nominee Information

Name _____

Address _____

_____

Telephone _____

Email _____

Personal
Years of Volunteer Service _____

Previous Profession_____

Place(s) of Employment Including Length of Service
_____
_____

Date Retired _____

Military Branch_____

Education (Where, Degree and/or Course of Study)
_____

Born: (Where, When) _____

# of Children _____ # of Grandchildren _____ # of Great Grandchildren _____

Contribution and Impact

- *Describe the contribution(s) to his/her community (please note timeframe)*
- *Describe how this individual's contribution impacted an individual(s), the community at large, an organization/agency/facility*

_____

_____

_____

_____

_____

_____

_____

_____

Other Volunteer Efforts or Achievements (*List organizations and positions held, include timeframe):*

_____

_____

_____

_____

Why did they start volunteering? _____

_____

_____

 *Nominee Name*_____

What does he/she feel has been the greatest reward from their volunteer experience?

_____

_____

Why do you believe this candidate should receive this award? _____

_____

_____

_____

_____

_____

Name of Individual and/or Organization Submitting the Nomination

_____

_____

_____

Address_____

Telephone_____

Email_____

Due by Monday, January 25th, 2016

- Fax to:

  (518) 295-2015

- Through email to:

  Nancy.Dingee@co.schoharie.ny.us

  Or

  meg.parsons@co.schoharie.ny.us

- By mail or in person to:

  Schoharie County Office for the Aging
  113 Park Place, Suite 3, Schoharie, NY 12157