



2009 Outstanding Social Service Awards

Award Categories:

1. Adult Volunteer
2. Youth Volunteer
3. Administrator/Executive Director
4. Employee
5. Board Member
6. Service Organization Youth
7. Service Organization Adult
8. Business
9. Team Collaboration
10. Jay Lowe (see attached description of award)

Nomination Guidelines

Nominees may not have been an award recipient within the past five years.

Please attach one typed page or less about the nominee (do not include the nominee's name in this narrative) and

Include information from the following areas:

- **Professional Involvement**
Organizations/Associations-offices held, committee involvement, honors received, special projects, and leadership impact
- **Community Service**
Affiliation with and participation in local, county, state, and national groups, civic and service organizations, church and charitable activities; offices held, committee involvement, length of membership, honors received, and leadership impact
- **Job Description**
Nominee's primary job or volunteer title, duties, and responsibilities
- **Accomplishments**
Contributions, involvement, initiatives, commitment, leadership, and other qualities related to Agency/Organization
- **Personal Attributes**
Describe what makes this nominee special to the agency/organization

NOMINATIONS DUE July 24, 2009

**Please fill out and return all nominations to:
HSAC (Human Service Agency Consortium)
P. O. Box 1542 Decatur, IL 62525
mbarnett@uwdecatur.org**



Outstanding Social Service Awards Nomination Form

Category: Please check one appropriate category

- Adult Volunteer
- Youth Volunteer
- Administrator/Executive Director
- Employee
- Board Member
- Youth Service Organization
- Adult Service Organization
- Business
- Team Collaboration
- Jay Lowe (Please use attached Jay Lowe Award Nomination Form)

Nominee:

Name: _____

Address: _____

Phone: _____

Agency/Organization Name: _____

Nominator:

Person making nomination: _____

Agency/Organization Name: _____

Phone: _____

AWARD NARRATIVE

Using the above guidelines, briefly describe (one typed page or less) why you are nominating the nominee for an Outstanding Social Service Award.

(Do not mention the nominee's name in the written portion of the nomination.)

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Jay Lowe Award Nomination Form

This award, named in memory of Jay Lowe, late supervisor of the Decatur Office of the Department of Human Services, Division of Rehabilitation Services (formerly the Department of Rehabilitation Services) shall be awarded periodically at the annual HSAC awards luncheon or other significant event, to one or more businesses, agencies, or other entities which has/have gone above and beyond to improve their facility's accessibility and/or employment opportunities for persons with disabilities in Macon County. The award reflects a true humanitarian effort by the recipient to improving accessibility of a building or public event, hiring and/or retention of workers with disabilities, ongoing staff development/training about disability issues, and outstanding volunteer services or contributions to a disability related cause. Employees of the said business, agency, or other entity shall not nominate their employee for the award (no self nomination). The HSAC Disability Division Chair/Co-Chair will advise/review all nominations for this award.

Nominees may not have been an award recipient within the past five years

Nominee:

Name: _____

Address: _____

Phone: _____

Agency/Organization Name: _____

Nominator:

Name: _____

Agency/Organization Name: _____

Phone: _____

AWARD NARRATIVE:

Briefly describe (one typed page or less) how the business, agency, or other entity has met the award criteria during the past several years.

(Do not mention the nominee's name in the written portion of the nomination.)

NOMINATIONS DUE July 24, 2009

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