



The Register-Guard



(For United Way use only)

Category: \_\_\_\_\_

Date Received: \_\_\_\_\_

**Nomination forms will be held for six months.**

# Volunteer of the Month Nomination Form

**DIRECTIONS:** *You may type into this form. You do not need to limit your answers to the space provided; attach additional pages if needed. Your answers are reviewed and scored by a committee of community volunteers. Once reviewed, the nominee's score is recorded and their form remains active for 6 months. It is important to answer each question to the best of your ability. Please ask your volunteer nominee to help you fill out the form as fully as possible. All volunteers will be acknowledged by United Way for their commitment to the community.*

Person or Organization making the nomination: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Contact name: \_\_\_\_\_

Email: \_\_\_\_\_

*I/we would like to nominate*

Name of Nominee: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

\* Eligible for Senior Role Model Award (50+ yrs)     Eligible for Youth Volunteer Award (18 yrs and under))

**\* Nominees in this category will also be considered for the Oasis Senior Role Model Award.**  
**For more information visit: [www.oasisnet.org/eugene](http://www.oasisnet.org/eugene)**

1. How has this person impacted your organization? Describe the volunteer's activities (10 points):

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2. How many hours on average does this person volunteer with your agency per week? How many hours this past year (10 points)?

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3. What other organizations does she/he currently volunteer with (10 points)?

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4. Why do you think this volunteer's story would inspire others (10 points)?

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5. State the primary reason for your nomination or summarize your experience with this volunteer (10 points).

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**\*The deadline for consideration of this nomination to be included in the program is the first of each month.** Organizations nominating individuals need not be affiliated with United Way. Winners are featured monthly in The Register-Guard.

For more information contact: United Way at 741-6000 Ex. 104

**Send application to:  
Volunteer of the Month  
United Way of Lane County  
3171 Gateway Loop  
Springfield, OR 97477  
FAX: (541) 726-4150.**