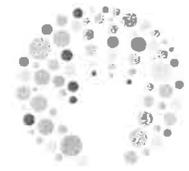


**MARIAN VAN LANDINGHAM
Lifetime Achievement Award**



Volunteer Alexandria
HANDS ON NETWORK

Nomination Form

The Marian Van Landingham Award is given to an Alexandria community member who has served this community consistently over his or her lifetime. Nominees have served one or more agencies in many different capacities and can include people who have served on boards and commissions as well as in organizing roles. **This person must live in Alexandria.**

NOMINEE

Name: _____ E-mail: _____

Home Phone: _____ Work Phone: _____

Address: _____ City, Zip: _____

NOMINATOR

Name: _____ Title: _____

Phone: _____ E-mail: _____

Agency: _____

Address: _____ City, Zip: _____

CRITERIA

1. Briefly explain why you are nominating this person: _____

2. List all other affiliations and timeframes (years) of the nominee: _____

3. Provide specific examples of the impact of the nominee's service on the Alexandria community: _____

4. Describe any special or unique contributions of the nominee: _____

5. In two sentences, describe why this nominee qualifies for the Marian Van Landingham Award: _____

Please return to:

Volunteer Alexandria, 123 N. Alfred St, Alexandria, Virginia 22314
Fax: 703-683-1793 or E-mail: mail@volunteeralexandria.org

**DEADLINE: Thursday, October 31, 2019,
5:00 p.m.**

**All awardees will be recognized at the event and will receive
a complimentary event registration to the event.**

JOAN WHITE

Grass Roots Volunteer Service Award

Nomination Form



Volunteer Alexandria
HANDS ON NETWORK

The Joan White Award is given to a volunteer who has selflessly committed time, energy and skills to help an organization to further its mission. **The nominee has to live or volunteer in Alexandria.**

NOMINEE

Name: _____ E-mail: _____

Home Phone: _____ Work Phone: _____

Address, City, Zip: _____

NOMINATOR

Name: _____ Title: _____

Phone: _____ E-mail: _____

Agency: _____

Agency address, City, Zip: _____

Brief description of agency (mission\goals\size\activities): _____

CRITERIA

1. Describe and summarize activities and volunteer service of nominee: _____

2. Approximately how much time per week, month or year does the nominee volunteer?

3. How long has the nominee worked with your agency? _____

4. What other agencies has the nominee volunteered with? _____

5. Provide specific examples of the impact of the nominee's service either on the operation of your agency or clients of your agency:

6. Describe any special or unique contributions of the nominee: _____

7. In one sentence, describe why this nominee qualifies for the Grass Roots Volunteer Service Award:

Please return to:
Volunteer Alexandria, 123 N. Alfred St, Alexandria, Virginia 22314
Fax: 703-683-1793 or E-mail: mail@volunteeralexandria.org

**DEADLINE: Thursday, October 31, 2019,
5:00 p.m.**

**All awardees will be recognized at the event and will receive
a complimentary event registration to the event.**

Youth Volunteer Service Award

Nomination Form



Youth Volunteer Alexandria
HANDS ON NETWORK

The Youth Volunteer Service Award is given to a youth volunteer, age 12 – 18 years, who has selflessly committed time, energy and skills to help a cause or an organization to further its mission. **Youth must be a resident of Alexandria.**

NOMINEE

Name: _____ E-mail: _____

Home Phone: _____ Work Phone: _____

Address: _____

NOMINATOR

Name: _____ Title: _____

Phone: _____ E-mail: _____

Agency: _____

Agency address, City, Zip: _____

Brief description of agency (mission\goals\size\activities): _____

CRITERIA

1. Describe and summarize activities and volunteer service of nominee:

2. Approximately how much time per week, month or year does the nominee volunteer?

3. How long has the nominee worked with your agency/on this cause? _____

4. What other agencies/causes has the nominee volunteered with? _____

5. Provide specific examples of the impact of the nominee's service either on the operation of your agency or clients of your agency:

6. In one sentence, describe why this nominee qualifies for the Youth Volunteer Service Award:

Please return to:

Volunteer Alexandria, 123 N. Alfred St, Alexandria, Virginia 22314

Fax: 703-683-1793 or E-mail: mail@volunteeralexandria.org

**DEADLINE: Thursday, October 31, 2019,
5:00 p.m.**

**All awardees will be recognized at the event and will receive
two complimentary event registrations to the event.**

3. Provide specific examples of the impact of the nominee's service on the Alexandria Community:

4. Describe any special or unique contributions of the nominee:

5. In two sentences, describe why this nominee qualifies for the RSVP Northern Virginia Award:

Please return to: Volunteer Alexandria, 123 N. Alfred St, Alexandria, Virginia 22314
Fax: 703-683-1793 or E-mail: mail@volunteeralexandria.org

**DEADLINE: Thursday, October 31, 2019,
5:00 p.m.**

**All awardees will be recognized at the event and will receive
a complimentary event registration to the event.**

RSVP NORTHERN VIRGINIA AWARD



NOMINATION FORM

Volunteer Alexandria
HANDS ON NETWORK

Volunteer Alexandria is celebrating the spirit of volunteerism and honoring people who give freely of their time in order to make a better community for all. This recognition will highlight an RSVP Northern Virginia volunteer 55+, who has used their skills and interests to make a valuable, lasting impact in our community. ***This person must live or volunteer their services in Alexandria.***

NOMINEE

Name: _____ E-mail: _____

Home Phone: _____ Work Phone: _____

Address: _____ City, Zip: _____

NOMINATOR

Name: _____ Title: _____

Phone: _____ E-mail: _____

Agency: _____

Address: _____ City, Zip: _____

CRITERIA

1. Briefly explain why you are nominating this person: _____

2. List all other volunteer affiliations and timeframes (years) of the nominee: _____



Volunteer Alexandria
MAKING THE DIFFERENCE

EMERGENCY PREPAREDNESS Volunteer Service Award *Supporter by the Alexandria Citizen Corps Council* Nomination Form

The Emergency Preparedness Volunteer Service Award is given to an Alexandria community member or group who demonstrated a unique and sustained contribution to Alexandria's emergency preparedness. Nominees will exhibit an awareness of and commitment to the safety and well-being of the community, its citizens and guests. **Individuals or groups nominated must live, work or go to school in Alexandria.**

NOMINEE

Name: _____ E-mail: _____

Home Phone: _____ Work Phone: _____

Address: _____ City, Zip: _____

NOMINATOR

Name: _____ Title: _____

Phone: _____ E-mail: _____

Agency: _____

Address: _____ City, Zip: _____

CRITERIA

1. Briefly explain why you are nominating this person: _____

2. Please describe the particular innovation, activity or idea that enhances Alexandria's citizens' safety, preparedness and/or resilience to potential disasters: _____

3. Please describe the impact this person/group is having or will have toward making Alexandria a safer and better prepared community.

4. Please describe the time and effort involved, as well as the names of other individuals or organizations that were part of the effort.

5. Please describe the original of this activity. What inspired this work?

Please return to:

Volunteer Alexandria, 123 N. Alfred St, Alexandria, Virginia 22314
Fax: 703-683-1793 or E-mail: emergencyresponse@volunteeralexandria.org

**DEADLINE: Thursday, October 31, 2019,
5:00 p.m.**

**All awardees will be recognized at the event and will receive
a complimentary event registration to the event.**

VOLUNTEER SERVICE RECOGNITION
ADULT 250 HOURS AND MORE
YOUTH 100 HOURS AND MORE



Volunteer Alexandria
MAKING A DIFFERENCE

Volunteer Alexandria is celebrating the spirit of volunteerism and honoring people who give freely of their time in order to make a better community for all. This recognition will highlight individuals who have served 250/100 hours of service **between July 1, 2018-June 30, 2019.**

Adult Recognition: is given to an adult volunteer, 21 and older, who has served 250 or more hours with one nonprofit organization. This can include people who have served on boards and commissions as well as in organizing roles. *This person must live or volunteer their services in Alexandria.*

Youth Recognition: is given to a youth volunteer 20 years old or younger, who has served 100 or more hours with one or multiple nonprofit organizations. This can include people who have served on boards and commissions. *This person must live or volunteer their services in Alexandria.*

1st NOMINEE's Name: _____ Adult Youth

Hours served: _____ E-mail address: _____

Home Phone: _____ City, Zip: _____

2nd NOMINEE's Name: _____ Adult Youth

Hours served: _____ E-mail address: _____

Home Phone: _____ City, Zip: _____

3rd NOMINEE's Name: _____ Adult Youth

Hours served: _____ E-mail address: _____

Home Phone: _____ City, Zip: _____

4th NOMINEE's Name: _____ Adult Youth

Hours served: _____ E-mail address: _____

Home Phone: _____ City, Zip: _____

NOMINATOR

Name: _____ Title: _____

Phone: _____ E-mail: _____

Agency: _____

Agency's Address: _____ City, Zip: _____

Please return to: Fax: 703-683-1793 or E-mail: mail@volunteeralexandria.org

DEADLINE: Thursday, October 31, 2019

