

NOMINATION FORM

## NONPROFIT FOUNDERS, LIFETIME ACHIEVERS, INSPIRING VOLUNTEERS & NEXT GENERATION

The Long Island Volunteer Hall of Fame Initiative, a coalition of organizations, invites you to participate in its Annual Volunteer Hall of Fame Program honoring outstanding individuals who by their foresight, leadership and dedication to volunteer causes, founded not-for-profit organizations on Long Island. A Lifetime Achievement Award in Volunteerism, Inspirational Service Award, and Next Generation Awards for youth will also be presented. Help us by nominating worthy individuals to be permanently honored in the Volunteer Hall of Fame.

www.livolunteerhalloffame.org

Eligibility for Founders	
	Any individual who, acting as a volunteer at the time of founding, founded or jointly founded a not-for-profit organization on Long Island that is at least 10 years old (with occasional exceptions) and still viable. This includes local chapters of national or international organizations.
	Nominee must be the acknowledged founder of the organization with documentation to verify, e.g. name on 501(c) (3) documents or letters of acknowledgement.
	Nominee must have been a resident of Nassau or Suffolk County at the time the organization was founded.
	The organization must still have an active volunteer base.
	A person may be nominated multiple times; however, Hall of Fame status can be attained only once.
	This honor may be awarded posthumously.

## **Selection Process**

Leaders in the community including nonprofit, business, academia, media, and public service sectors plus members of the Hall of Fame Initiative will serve on the panel of judges that select founders. All decisions are final. Inductees in each category will be notified in December; the formal induction ceremony held in February. Winners must sign a release agreeing to their photos, bios and information about their organization being published in our Hall of Fame program, promotional materials, and display. Media may also be notified.

- Children & Youth Services- Programs that offer guidance, build self-esteem, and ensure the safety and well-being of children and young adults
  - Early Care and Education Programs
  - o Pregnant & Parenting Teen Services
  - o School-Age Child Care
  - Tutorial and Mentoring
  - o Youth Development & Recreation
- 2. Cultural Arts- Programs that enrich the soul
  - o Literary Organizations
  - o Museums & Galleries
  - o Theater, Music & Dance Groups
  - o Historic Preservation
- Education- Programs that offer knowledge, skills and build capability
  - o Elementary & Secondary
  - o Higher Education
  - Adult Mentoring
  - o Career/Vocational Assistance
  - o Continuing Education
  - Literacy Services
  - Workforce Development
- Emergency Services- Programs that save lives & build safer communities
  - Auxiliary Police and Fire Services, Neighborhood Patrols, and EMT Organizations
  - o Hotlines/Crisis Intervention Services
  - Relief Efforts
- Environment- Programs that protect our land, water, air, wildlife, and domestic animals
  - Land Conservation
  - Ocean & River Reclamation
  - Pollution Control
  - o Recycling Efforts
  - Sanctuaries & Animal Rescue Facilities
- Family Support- Programs that assist, strengthen, and empower families
  - o Family Resource Centers
  - Family Violence Services
  - Multi-Service Including "Umbrella" Organizations and Indirect Service Agencies
  - o Parent Leadership Programs
  - o Respite Care

- 7a. **Health** 7b. **Mental Health-** Programs that contribute to the health and well-being of people
  - Hospitals and Health Clinics
  - Mental Health Facilities
  - Organizations that Address One or More Health/Mental Health Issues
  - o Retreat and Wellness Programs
  - o Substance Abuse Services
- **8. Homelessness-** Programs that provide emergency shelter, transitional and permanent housing
  - Shelters
  - Subsidies and Incentive Programs for Permanent Housing and Home Ownership
  - o Transitional Housing
- 9. Hunger- Programs that provide emergency food aid & advocacy
  - Food Bank & Rescue
  - o Food Pantries
  - Homebound Food Delivery
  - Outreach and Assistance Accessing Government Resources
  - Soup Kitchens
- Philanthropy- Programs that depict the generosity and concern of human beings for one another
  - Foundations, Funds, and Other Organizations that Support the Work of Others
  - o Service Clubs, Trade Organizations, and Unions
  - Volunteer Services
- 11. **Seniors** Programs that provide support to the elderly population
  - o Senior Advocacy Services
  - o Senior Centers, Clubs, and Adult Day Care
  - Specialized Housing
- 12. **Special Needs-** Programs that address the needs of physically challenged, learning and developmentally disabled individuals
  - o Advocacy Efforts
  - o Educational Programs
  - Facilities Providing Therapies & Other Services
  - o Pet Companion Programs
  - o Recreation
  - Sheltered Workshops

## 2012 Long Island Volunteer Hall of Fame Founder of Nonprofit Organization Nomination Form

**Instructions:** Please type or print all information. Only completed applications will be accepted. The information must be restricted to this form. Nominees must agree to the publication of their names and photographs by signing the form at the bottom.

Mail completed form to: Long Island Volunteer Hall of Fame c/o Long Island Volunteer Center, 58 Hilton Avenue, Hempstead,

NY 11550. If there are any questions, please call: Long Island Volunteer Center, 516-564-5482. Nomination deadline: September 30, 2012 Nominee's Name \_\_\_\_\_ Your Name (nominator) \_\_\_\_\_ Address City \_\_\_\_\_ State \_\_ Zip \_\_\_\_ City \_\_\_\_ State \_\_ Zip \_\_\_\_ Daytime Phone \_\_ Daytime Phone \_\_\_\_\_ In what capacity and for how long have you known the nominee? Organization's Name Founder Category (please circle only one) 1 2 3 4 5 6 7 8 9 10 11 12 Please briefly describe why you think the nominee has earned Hall of Fame status. References- Must provide two professional references who may be contacted to verify the extent and scope of the nominee's volunteer activities (excluding nominator). Name Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_ How does this person know the nominee? \_\_\_ How does this person know the nominee? By signing below I agree to the publication of my full name, photo, bio and information regarding my volunteer activities. I also acknowledge the information shared on this nomination form is truthful and accurate.

Nominee's Signature: