



**Milwaukee County Senior Citizen
Hall of Fame
Nomination Information
COVER PAGE**



INFORMATION ABOUT THE NOMINEE

Last name	First Name	Initial
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Address	City, State	Zip code
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Telephone () _____ Date of Birth _____

Length of Residency in Milwaukee County _____

Current Occupation or Former Occupation if retired _____

Was nominee advised by sponsor of nomination? Yes ___ No ___

INFORMATION ABOUT THE SPONSOR

Name _____ Telephone () _____

Agency or Organization (if applicable) _____

Address	City, State	Zip code
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Email _____

Contact person (if different from above) _____ Telephone () _____

Please attach additional information to cover page
Refer to Guidelines for Nominating

Nominations due February 9, 2015

<p>Attach cover page to additional nomination information and return to: Milwaukee County Department on Aging-Area Agency on Aging Hall of Fame Selection Committee Attn: Jill Knight 1220 West Vliet Street, Suite 302 Milwaukee, WI 53205</p>

Milwaukee County Senior Citizen Hall of Fame Nominee Information, Guidelines and Nomination Cover Sheet

Nominee Information:

1. Nominees must be 60 years of age or above, living, and residents of Milwaukee County.
2. Up to five awardees will be chosen.
3. Nominees must qualify in any one or combination of the following areas:
(Please stress volunteer activities, including number of volunteer hours in the previous two years.
 - a. Gave voluntary service of an educational, community, or humanitarian nature.
 - b. Made exceptional contributions as a volunteer in efforts to improve the lives of people regardless of race, creed, or national origin.
 - c. Advocated as a volunteer on behalf of Wisconsin senior citizens.
4. Prior submissions can be resubmitted. **Information must be updated.**
5. No special award categories will be given.
6. Nominations may be accompanied by letters of endorsements.
7. Individuals may not nominate themselves.
8. The cover form provided must be included with the nomination.
9. Paid work in any category will not be considered.
10. An individual may not nominate more than one person per year.
11. Members of the selection committee and the Commission on Aging are not eligible for nomination in the year they serve in any of these capacities.

Guidelines for Nominating:

Fill out the cover page provided **AND USE EXTRA PAGES** to answer the following completely, and concisely:

1. Specify nominee's active participation in:
 - a. Groups and organizations:
List name of each organization, nominee's involvement, and years of affiliation.
 - b. Specify additional activities, achievements and awards, including dates.
 - c. List specific volunteer activities.
Include explanation of duties, accomplishments, and/or responsibilities that demonstrate exceptional volunteerism.
2. Estimate **total volunteer hours in the previous two years** preceding the date of nomination, if applicable.
3. What special characteristics of your nominee make him or her worthy of placement in the Milwaukee County Senior Citizen Hall of Fame?
4. Attach related and supporting documents such as letters of endorsement.
5. **The cover page provided must be filled out completely and included as part of the nomination.**

Return Nominations to:
Milwaukee County Department on Aging
Hall of Fame Selection Committee
Attn: Jill Knight
1220 West Vliet Street, Suite 302
Milwaukee, WI 53205

Nominations should be post marked or hand
delivered to the Department on Aging by

February 9, 2015

Additional forms available by calling (414) 289-6794 or at www.milwaukee.gov/county/aging