

When did the special project or task take place?	
How did the service benefit the entire council?	
What made the service above and beyond the expectations of the position?	
How did the service contribute to the achievement of council goals and objectives?	
Letters of support are needed from two additional individuals who are familiar with the service performed. Please use form #4065 (Letter of Support). When completed, attach them to this nomination. List below the names of persons asked to provide letters of support:	
Name:	Position:
Name:	Position:
Name:	Position:
Signature of nominator:	Date submitted:

E-mail to: adultrecognitions@gsvsc.org
 Deadline is October 31. This award requires board approval.

For Office Use Only

Recognition Committee decision: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Pending, more information required
Date of Recognition Committee meeting:
If pending, please describe the information required:
Council Board approval: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Pending, more information required
Date of Board meeting:
If pending, please describe the information required: