



City of Thompson
2010 Volunteer of the Year Awards



1. NOMINEE

Individuals must have performed such service on a wholly volunteer basis and not for pay.

Name _____

Name of Agency/Organization _____

Mailing Address _____ Postal Code _____

Telephone _____ E-mail _____

2. NOMINATOR

Nominations should come from individuals, groups or agencies that have benefited from the effort of the volunteer.

Name _____

Title and Organization, if appropriate _____

Mailing Address _____ Postal Code _____

Telephone _____ E-mail _____

3. NOMINATION

I hereby nominate _____

For the **City of Thompson 2010 Volunteer of the Year Award**

Signature of Nominator

Date

4. DESCRIPTION OF VOLUNTEER EFFORTS

Please describe in the space provided only, or one page typed, the description the volunteer efforts of the nominee. Include information describing the activities the nominee undertook, impact of the Nominee's efforts on the individual or group receiving help.

(Nominations must be received by 4:00pm, March 19, 2010)

