

**HUDSON VALLEY LEISURE SERVICES ASSOCIATION
PO BOX 54 NEW CITY NEW YORK 10956**

Nomination Procedures: Any HLVSA member may make nominations for the various award categories. In addition, nominations will be accepted from non-members for the Voluntary Service Awards. Nominations for Professional Achievement and Professional Service Awards may be made by association members only. Applications may be mailed to the above address, attn: Awards Chairperson, or via email to: c.connington@clarkstown.org

Deadline: All nominations with supporting data must be received by the Chairperson of the Awards and Scholarship Committee **no later than May 1, 2019**. The presentation of all awards will be held **on May 29, 2019**.

Criteria:

VOLUNTARY SERVICE AWARD (ORGANIZATION) The nominee shall be an organization that has provided unselfish service on behalf of an institution, private or voluntary agency in Rockland, Orange, Sullivan, Dutchess, Ulster, or Putnam Counties and in the interest of recreation, parks, conservation or other related leisure services for at least 5 years in the program for which is to being cited.

VOLUNTARY SERVICE AWARD (INDIVIDUAL) The nominee shall be a person that has provided unselfish service, as a volunteer, on behalf of a department, organization, agency or institution in Rockland Orange, Sullivan, Dutchess, Ulster, or Putnam Counties and in the interest of recreation, parks, conservation or other related leisure services for a period of 3 or more years.

PROFESSIONAL ACHIEVMENT AWARD The nominee shall be a member of HVLSA and during the year preceding his/her nomination, he/she shall have completed a major service to that society or a major accomplishment in the field of recreation, park or conservation administration, program supervision, leadership or facility development.

PROFESSIONAL SERVICE AWARD(S) eligible are active professional members of the HVLSA who have served full time in the field of recreation, parks and or conservation in any geographic area. Awards are presented after 10 years of service and for every five years thereafter.

DETAILED EVIDENCE SUPPORTING ALL NOMINATIONS MUST BE INCLUDED WITH EACH APPLICATION.

NOMINATION FORM

Name of Award: Please make an (X) next to the appropriate award title.

___ **Voluntary Service (Individual)** ___ **Voluntary Service (Organization)**

___ **Professional Achievement Award** ___ **Professional Service Award**

The name and title/position of the NOMINEE:

Address of the NOMINEE:

Daytime Telephone # and Email of the NOMINEE:

Please write a narrative supporting why this person and or organization should be considered for this award:

Please print more copies of this form as needed

Nominated by: _____

Daytime Telephone Number of Nominating Person _____

Email and or Address of Nominating Person: _____