



Volunteer! Baton Rouge
460 North 11th Street
Baton Rouge, LA 70802
(225) 343-8270
FAX 225.343.3070

THE POWER OF 9 HONORS NOMINATION FORM

Category (circle only one): Adult Youth (DOB: _____) Group (# of volunteers _____)

Nominee Name: _____ If Group, Contact Name: _____

Daytime Phone: () _____ Evening Phone: () _____

Street Address: _____ City/State/Zip: _____

Number of years nominee has volunteered: _____ Hours per month: _____

Employment Status (circle one) Full-time Part-time Retired School Other

Has nominee previously been nominated (circle one) No Yes If yes, what year _____

Name of Nominator: _____

Daytime Phone: () _____ Evening Phone: () _____

Street Address: _____ City/State/Zip: _____

Organization for which nominee volunteers

Organization: _____ Phone: _____

Street Address: _____ City/State/Zip: _____

Agency Director: _____

Services provided: _____

Supporting Contacts:(Please provide at least one other person who may be contacted to get supporting information and his/her activities)

Name: _____ Connection to nominee _____

Daytime Phone: () _____ Evening Phone: () _____

Please attach a description of why the Nominee is deserving of the *Power of 9 Honors Award*. This narrative should include the nominee's achievements, the impact they have made, any challenges that they overcame, other awards received in the past year, and other reasons that may be helpful in determining this award. Supporting materials may also be included.

(For more information, please call Blythe Daigle at 343-8270 or email at bdaigle@volunteerbatonrouge.org)