



PRESIDENT'S VOLUNTEER SERVICE AWARDS FORM B



INDIVIDUAL AWARD CERTIFICATION FORM

A separate form should be completed for each intended recipient of the President's Volunteer Service Award. Please type or print using blue or black ink. Photocopy this form as needed. The Award Order Form and payment MUST accompany this form.

Individual Information

NAME _____
 STREET ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 PHONE (____) _____ EMAIL _____
 Name preferred on certificate _____

Volunteer Information

How many hours did the nominee complete during the 12-month period? _____
 Was the nominee 15 years or younger at the completion of the hours? ____yes ____no Kid (Ages 5-10) Teens (11 to 15)
 Was the nominee 16 to 25 years old at the completion of the hours? ____yes ____no Young Adult (16-25)
 Has the nominee completed over 4000 hours of service over his/her lifetime? ____yes ____no Adults (26 and older) Families and Groups
 Where did the nominee perform the majority of their volunteer service? _____ U.S. state or country

Service Classification (Check the box in which most of the volunteer activity took place.)

- Youth Achievement**
 Includes volunteer activities such as mentoring, coaching, tutoring, improving literacy in areas such as reading and finance, and volunteering to keep young people engaged academically in education.
- Parks and Open Spaces**
 Includes volunteer efforts to conserve and protect our parklands and gardens, neighborhood cleanups and creating safe playgrounds. It also includes creating safe and meaningful experiences and outdoor activities for individuals to enjoy the environment and our natural resources.
- Healthy Communities**
 Includes volunteer efforts to help the elderly, disabled, diseased, hungry or homeless, and to improve the economic health of the community. These could include volunteering for health and nutrition education services, immunization campaigns, resume building, career training, disease screenings, hospital support, blood drives, veterans outreach, working with local public health programs, micro-enterprise and business development.
- Public Safety & Emergency Response**
 Includes volunteer efforts for individuals and families to make their homes, and their communities safer from the threats of crime, terrorism, and disasters of all kinds. It includes preparedness training, volunteer firefighters, and programs like Citizen Corps, Neighborhood Watch, Medical Reserve Corps and Volunteers in Police Service.

Tell us more about the award recipient's service. (35 words or fewer) (OPTIONAL)

Demographic Information (this section is optional)

Gender _____ Female _____ Male
 Age _____ 5-15 _____ 16-25 _____ 26-35 _____ 36-49 _____ 50+
 Ethnicity: Hispanic or Latino? ____yes ____no
 Race Please mark one or more
 _____ Alaska Native/ American Indian _____ Black / African American _____ White
 _____ Asian _____ Native Hawaiian or Pacific Islander
 Education (Highest level completed) _____ K-8 _____ High School or GED _____ Undergraduate Degree
 _____ 9-11 _____ Some College _____ Graduate/Professional Degree

I hereby certify that my organization has verified that each individual or group specified on this form has met the respective criteria necessary to earn the President's Volunteer Service Award and completed the volunteer activities in at least one of the four Volunteer Service Action Priorities.

Signature _____ DATE _____
 Name of organization _____

See reverse for Public Burden Statement and Privacy Act Notice.

OMB Control #: 3045-0086