

## Recommendation for Silver Lining Volunteer Award

**Eligibility Criteria:** The Silver Lining Award is a volunteer award, which is open to any individual, group, or business that has donated time and effort to provide a humanitarian benefit to residents of Sanilac County during the past year. (The effort must be voluntary and not involve personal or monetary gain. However, minimal out-of-pocket reimbursement such as mileage would not disqualify an honoree.)

**Selection:** Representatives of the sponsoring groups (Sanilac County Community Collaborative, Sanilac County Community Foundation, and United Way of Sanilac County), will serve as the selection committee.

**We regret that due to the selection process, nominations received after September 4 can never be accepted.**

Questions?

Contact Joan Nagelkirk at (810) 648-3634 [joan@clearideas.biz](mailto:joan@clearideas.biz) or Trish McAtee at (810) 648-3634 [trish@clearideas.biz](mailto:trish@clearideas.biz)

Electronic nomination forms are available at [www.sanilacountycommunityfoundation.org](http://www.sanilacountycommunityfoundation.org)

- Category:**  Youth Individual – Individuals 21 years of age and younger  
 Youth Group – clubs, student groups, other groups of unrelated people 21 years and younger  
 Individual – Individuals, couples and families  
 Group – Service clubs, churches, charities, and other groups of unrelated people  
 Business – For-profit businesses

**PLEASE TYPE OR PRINT CLEARLY**

**Who do you recommend for an award?** *Please give complete name, address and phone number.*

Nominee's Name \_\_\_\_\_

Person To Contact, if group or business \_\_\_\_\_

Nominee's complete mailing address \_\_\_\_\_

\_\_\_\_\_ Nominee's Phone \_\_\_\_\_

**Why are you making the recommendation?**

*Please supply as much information as possible such as: organizations involved, projects completed, number of Sanilac County residents served, years of service. What makes this person, group or business exceptional? Please remember that we do not necessarily know this individual so as much information as possible is appreciated. For additional space, please attach a separate sheet of paper. Do NOT use the back of this form.*

**Other information that you'd like to share:**

*Anecdote, story, or personal interest, how to pronounce person's name, or anything else we need to know.*

**Nominator Information:**

Your name \_\_\_\_\_

Complete mailing address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Please return by September 4, 2009 to:**

Sanilac County Community Foundation, 47 Austin St., PO Box 307, Sandusky, MI 48471-0307

Fax: 810-648-4418