



Volunteer of the Year

Words cannot describe the lasting effects that volunteers have on long term care residents and staff. Volunteers are exceptional people who give the greatest gift — their time.

KAHCF's Volunteer of the Year Competition seeks to recognize the best volunteers in Kentucky's long term care facilities, and, while honoring these unique individuals, we offer thanks to the hundreds of other dedicated volunteers who make facilities special.

Nominations can include adult, youth, and group. Up to 5 winners may be chosen representing any combination of these three categories. Award presentations may include photos, video, and/or testimonies. Volunteers must have served in the facility for at least one year as of June 1, 2018

The top 3 – 5 scoring nominees will be recognized at the KAHCF awards banquet in November.

Rules of Entry

1. Each entry should include a completed, typed nomination form, including completed answers to the attached questions. **DO NOT** use facility letterhead.
2. **Submit only the original**, and the facility should keep a copy.
3. The volunteers of the year will be recognized at the Quality Awards Banquet in an expanded format, including photographs and testimonials. Facilities with a volunteer of the year will be contacted to provide the additional information.

Award winners recognized in this category are not eligible to re-enter the competition for three years following their win.

ENTRIES MUST BE POSTMARKED BY FRIDAY, JUNE 15, 2018

All KAHCF Awards Forms are available on the KAHCF website — www.kahcf.org.

Under What's New, click on Awards Forms. Each Category is in MS Word format and available to complete via computer



Volunteer of the Year Nomination Form

Name of Individual Volunteer or Group _____

Facility Submitting Nomination _____

Address _____

City _____ State KY Zip _____

Phone Number _____ Fax Number _____ E-mail _____

Nomination Submitted by _____
(Name and title)

If you do not use the online forms, retype each question and provide responses to the following. Entries that do not follow this format will not be accepted. **DO NOT** reveal the identity of your nominee, facility name, city, county, or any reference that would identify the nominee in the narrative.

1. How long has the nominee(s) been volunteering at your facility? _____
2. How frequently does the nominee(s) visit your facility? _____
3. Number of hours nominee(s) volunteered at your facility during the past 12 months (June 2017 through May 2018) _____
4. In no more than 500 words, summarize the major responsibilities and accomplishments of the nominee(s) as a volunteer. Please include specific examples of the following:
 - a. How does this volunteer help residents reach their potential?
 - b. In what ways has the volunteer helped residents become active members of the facility community or the larger local community?
 - c. What makes this volunteer's contributions unique?
 - d. How have residents acknowledged the value of your nominee's contributions to them?

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