
Genesee County Youth Board

Presents

2024 Recognition Awards

Nomination form for

Youth Recognition Award

These awards are presented annually by the Genesee County Youth Board.

Purpose: To recognize those youth who are positive role models, have performed **outstanding** service for their community, and/or have assumed **extraordinary** roles within their families.

Criteria:

- ◇ Nominees must reside in Genesee County and be in grades 8-12. Nominations outside this age range may be considered under special circumstances.
- ◇ This award especially gives recognition to youth who may not receive it otherwise.
- ◇ Academic or athletic achievement will NOT be considered in the selection of award recipients.
- ◇ Community service projects for which school credit is received or fulfill requirements for other awards will NOT be considered unless the youth goes above and beyond the required level of participation.
- ◇ Nominations from family members will be accepted only if accompanied by a supporting recommendation from a non-family member.
- ◇ The Youth Boards reserve the right to limit the number of award recipients from each school district or community.

Please complete the reverse side of this form and return it to the Genesee County Youth Bureau by Tuesday, February 20, 2024.

Recipients will be notified in March 2024.

Nomination Form for Youth Recognition Award

NOMINEE INFORMATION

Name: _____ (Identifies as) Male _____ Female _____ Age/Grade: _____

Address: _____ Town: _____ Zip: _____ Phone: _____

School: _____ Name of Parents/Guardian: _____

Parent Address (if different from above): _____

Please check whether youth is being nominated for:

____ Outstanding Role in Community and/or ____ Extraordinary Role in the Family

PLEASE ANSWER ALL OF THE QUESTIONS BELOW TO THE BEST OF YOUR KNOWLEDGE:

1. On a separate sheet, describe the **Outstanding or Extraordinary Contributions to Community and/or Family**. Include as much information as possible regarding specific duties, projects, family circumstances, and other activities or interests. *This information will be included in a program write-up.* Any confidential information that should be considered in the selection process should be titled "CONFIDENTIAL" at the end of the nomination so it is not included in the program.

2. Estimated number of volunteer hours:

0-50 _____ 51-100 _____ 101-150 _____ 151-200 _____ 201-300 _____ 300+ _____

3. How often (hours/week, month, or year) & for how long (years/months) has this person been volunteering?

Hours _____ / (week) (month) (year) for Years _____ Months _____

4. If community service was completed for school or a club, has the youth exceeded the number of minimum hours required? Yes _____ No _____ If yes, by how many hours? _____

5. Has this youth been previously recognized for the community service for which s/he is being nominated?

Yes _____ No _____

6. Additional person who can support this nomination:

Name: _____

Phone: _____

NOMINATOR INFORMATION

Name: _____ Relationship to Nominee: _____

Address: _____ Town: _____ Zip: _____

Phone: _____

Email: _____

Best way to be reached: ggg Email

Phone Call

Text

Submit all nominations to:

**Genesee County Youth Bureau
5130 East Main St
Batavia, NY 14020
Phone: 344-3960 Fax: 345-3063
Email: Youth.Bureau@geneseeny.gov
Due Date: Tuesday, February 20, 2024**