



# NOMINATION FORM

EDUCATOR \_\_\_\_\_

FOSTER PARENT \_\_\_\_\_

CASA VOLUNTEER \_\_\_\_\_

LEGAL/JUDICIAL \_\_\_\_\_

LAW ENFORCEMENT \_\_\_\_\_

MEDICAL PROFESSIONAL \_\_\_\_\_

DEPT. OF SOCIAL SERVICES \_\_\_\_\_

MENTAL HEALTH PROFESSIONAL \_\_\_\_\_

Best Category To Describe Your Nominee:

NAME \_\_\_\_\_

AGENCY/COMPANY \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

**PLEASE ANSWER THE FOLLOWING QUESTIONS. ATTACH ADDITIONAL PAGES AS NEEDED.**

1. What is the nominee's experience, professional or volunteer, related to the field of child abuse? (maximum of 1,000 characters)
2. Please describe how the nominee has made a difference in child abuse prevention, intervention, or advocacy in our community. (maximum of 5,000 characters)
3. Describe what makes the nominee's contribution noteworthy. (maximum of 5,000 characters)
4. Please add any additional comments about the nominee that will be helpful in selecting the nominee for an award. (maximum of 2,000 characters)

If the selection committee needs to ask follow-up questions, would you be available for a brief phone interview?

\_\_\_\_\_ YES \_\_\_\_\_ NO--Name/Phone/Email \_\_\_\_\_

**NOMINATIONS ARE DUE JANUARY 14, 2019  
AWARDS CELEBRATION TO BE HELD APRIL 12, 2019**

Send nominations with attachments to the attention of Christina Hatch

Children's Trust 541 Luck Ave., Suite 308 Roanoke VA 24016 roact.org (540) 344-5679 Email: christina.hatch@roact.org