**Who should be nominated? Who is judging and what will be the criteria?**

**Ohio Association of Free Clinics & Ohio Department of Health**

2018 Free Clinic Volunteer of the Year Nomination

The Volunteer of the Year is a person that has gone beyond the call of duty for your organization within the last year. They have shown exceptional dedication to your organization, and have helped make your organization more successful. We will honor one Dentist volunteer, one Nurse volunteer, and one Physician volunteer each year. The panel of judges will consist of members of the OAFC Board and Staff, as well as individuals from the Ohio Department of Health. Each questions possible point value is indicated in parentheses after the question.

**If I nominated someone last year, should I nominate them again?**

Yes! Please continue to nominate the volunteers who are invaluable to your clinic!

**Can multiple people nominate the same person?**

No, we would like to only have one application per nominee. However, if more than one person/nominator wants to contribute, please attach letters of support for the nominee from those additional people. Please send the application and letters of support as one complete package.

**When are applications due?**

Applications are due Wednesday, October 17th 2018 at 5pm and must be submitted to Katie either by email to [kkisseberth@ohiofreeclinics.org](mailto:kkisseberth@ohiofreeclinics.org) or to our Dropbox at: <https://www.dropbox.com/request/upAiaERIe2iVOzq4RvGB>

**What are the requirements to apply?**

Two requirements: **1)** Complete and submit the application form and **2)** The person you nominate must be available to attend the Free Clinic Appreciation Month Celebration on December 5th in Columbus.

**What does the winner receive?**

Each Volunteer of the Year winner will receive state-wide recognition for their extraordinary efforts and a plaque for their achievement.

**Why was this award created?**

As designated in House Bill 320, of the 130th General Assembly of the Ohio House, December is Free Clinic Appreciation Month in Ohio. As part of its promotion activities, ODH must select a

free clinic to be named "free clinic of the year" and a physician, nurse, and dentist to be

named "free clinic volunteer of the year" in each of the respective professions. This award was created because volunteers of Ohio’s free clinics are the backbone to the clinics service to their community. Without them, many of our clinics would not exist or be successful in their service. The volunteers donate their time, energy, and efforts to ensure free clinics operate smoothly. For all these reasons and numerous others, they deserve our appreciation and gratitude.

Which category are you applying for: € Physician € Dentist € Nurse

**Ohio Association of Free Clinics & Ohio Department of Health**

Free Clinic Volunteer of the Year Nomination

**Nominee’s** Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Nominee’s** Credentials: ­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Nominee’s** Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nominator’s Name and Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to the Nominee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nominator’s Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The ceremony will be December 5th in Columbus. Will the Nominee be able to attend the event?

€ Yes € No

**PLEASE PROVIDE AS MUCH DETAIL AS POSSIBLE**

**How long has the nominee volunteered at the organization and what amount of time does the nominee devote to this work (hours per week/month)? (2 Points)**

**How many people are affected by the nominee’s service? (3 Points)**

**What unique qualities sets the nominee apart from other volunteers? (5 Points)**

**What does this nominee enable the clinic to do that it otherwise would not be able to? (5 Points)**

**What has been the impact of this nominee’s contributions and accomplishments to the clinic and community? (5 Points)**

**Please give us a story or specific example of a time the Nominee went above and beyond for the clinic. (5 Points)**