

**NOMINATION FORM FOR
“OUTSTANDING HOSPITAL VOLUNTEER”**

(Nomination must be received by Department Chairman, no later than March 31, 2024)

Auxiliary Name _____ **Number** _____ **District** _____

Select One Outstanding Hospital Volunteer from your Auxiliary. The Volunteer may be any Auxiliary member who has served as a Volunteer in one of the medical facilities in our Department (VAMC, Outpatient Clinic, Local, State or Children’s Hospitals, Rest Homes and Convalescent Homes) VAVS Representatives and Deputies are also included.

First Place winner will be forwarded to National to compete in our Division.

Name of Volunteer _____

(Please type or print)

Complete Mailing Address: _____

1. How long has he/she been a VFW Auxiliary Volunteer? _____
2. Total volunteer hours served during 2023-2024? _____
3. Total hours served as Hospital Volunteer? _____
4. What weekly or monthly Hospital programs has he/she participated in?

5. What are the volunteer’s assignments? _____

Very Important: Please attach on a separate sheet(s) any detailed information as to why this Auxiliary member is an “**Outstanding Hospital Volunteer**”. You may include pictures, newspaper articles telling of his/her hospital work, copies of awards, etc.

**NOMINATION FORM FOR
“OUTSTANDING HOSPITAL YOUTH VOLUNTEER”**

(Nomination must be received by Department Chairman no later than March 31, 2024)

Auxiliary Name _____ **Number** _____ **District** _____

The Hospital Youth Volunteer can be nominated for their hours volunteered at any hospital, nursing home, helping with patient care or Outpatient Clinic.

Name of Volunteer _____

(Please type or print clearly)

Complete Mailing Address _____

Name and telephone number of person nominating Youth Volunteer:

1. Total volunteer hours during 2023-2024? _____

2. What weekly or monthly programs has he/she participated in ? _____

3. What are his/her volunteer assignments? _____

Very Important: Please attach on a separate sheet of paper why he/she should receive “**The Outstanding Hospital Youth Volunteer Award**”. You may include pictures, newspaper clippings, whatever information that will help us get to know the applicant for this award.

“Wind Beneath Our Veterans Wings”

“Banding Together for Our Veterans”