



Special Olympics
New Jersey

AWARD



Special Olympics
New Jersey

NOMINATION CATEGORIES

CATEGORY I

Outstanding Athlete/Local TRAINING PROGRAM best example of high quality sports training for Special Olympics athletes. Please indicate the location of the program, number of athletes training, number of training sessions, sports offered, etc.

Outstanding MEDIA COVERAGE best example of extensive, accurate coverage of Special Olympics events. Please attach samples (i.e., tapes, articles, etc.) of the coverage.

INDIVIDUAL Volunteer of the Year best example of voluntary action to the Special Olympics program. Please indicate number of volunteer hours, committee involvement, etc. for each nominee.

Outstanding Volunteer GROUP/ORGANIZATION best example of voluntary action to the Special Olympics program. Please indicate the number of volunteers and the volunteer activities for the group.

Outstanding COACH coach of any sport that demonstrated a high degree of technical skill and personal commitment to preparing athletes for participation in Special Olympics events.

FAMILY of the Year the family of a Special Olympics athlete who has demonstrated unique and outstanding support of Special Olympics and Special Olympics athletes.

CATEGORY III

Special Recognition Awards

S. Michael Higgins Special Olympics Scholarship for an athlete who demonstrates a passion for sport through a commitment to training.

Bessie Perlman Achievement for the athlete who demonstrates a dedication to sportsmanship and success in the community.

Special Olympics New Jersey Lifetime Achievement for an individual who has dedicated 20 years or more to the SONJ program and who has advanced the Special Olympics' mission. Please provide three references and a 200-word narrative with Parts A, B, & C of the Nomination Form.

CATEGORY IV

Special Olympics New Jersey Hall of Fame

Individual who has advanced the Special Olympics movement in one of the following categories: sports & training; fundraising; or public awareness. Please provide three references and a 200-word narrative with Parts A, B, & C of the Nomination Form.

CATEGORY II

One Athlete for each season: Fall, Winter, Spring, Summer.

Outstanding Athlete - Fall Sports for the Special Olympics athlete who has shown determination, dedication to training and increased proficiency in Fall Sports.

Outstanding Athlete - Winter Sports for the Special Olympics athlete who has shown determination, dedication to training and increased proficiency in Winter Sports.

Outstanding Athlete - Spring Sports for the Special Olympics athlete who has shown determination, dedication to training and increased proficiency in Spring Sports.

Outstanding Athlete - Summer Sports for the Special Olympics athlete who has shown determination, dedication to training and increased proficiency in Summer Sports.



2010 AWARDS NOMINATION FORM



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Award nominations are open to all persons and programs associated with the SONJ organization who have made distinguished contributions in the 2009-2010 program year. **All selections will be made by the Awards Committee from nominations submitted on this form.** You will be informed if your nominee is selected by the Awards Committee.

PLEASE PRINT USING PEN or TYPE. Be sure spelling of nominee's name and address are correct. Submit a separate Nomination Form for each individual or group (feel free to make copies). Complete all sections and attach supporting material, if applicable.

DEADLINE for receipt of nominations at the Chapter Office is by 5:00 PM, MONDAY, OCTOBER 18, 2010.

MAIL FORM TO: Awards Committee, Special Olympics New Jersey, 3 Princess Road, Lawrenceville, NJ 08648
or FAX FORM TO: Fax: 609-896-8040, **Attn: Awards Committee**

Name of Person Completing this Form: _____

Address: _____ / _____ / _____
City State Zip

Day Phone: (____) _____ - _____ E-mail address: _____

Eve Phone: (____) _____ - _____

PART A—NOMINEE INFORMATION

NOMINEE NAME: _____

Address: _____ / _____ / _____
City State Zip

Day Phone: (____) _____ - _____ Eve Phone: (____) _____ - _____

CONTACT NAME: _____ Phone: (____) _____ - _____

PART B—CATEGORY / NAME OF AWARD

NOMINATED FOR : _____
(Name of Award - see Award Categories page)

County in which nominee resides: _____ Area: _____

Approximately how many years has the nominee been involved with Special Olympics? _____ years

In what sports, activities or events has the nominee been involved? _____

Please list any certifications, awards or honors the nominee has received from Special Olympics or outside the organization. _____

Please state the nominee's place of employment, school or business affiliation: _____

NOMINEE NAME: _____

2010 Awards Nomination

2010 AWARDS NOMINATION FORM

Please list five (5) points that would describe why the nominee should be the recipient of this award. Use additional pages if needed. Attach any materials that will support the nominee's selection.

1. _____

2. _____

3. _____

4. _____

5. _____
