

YOUTH RECOGNITION AWARDS PROGRAM

CRITERIA

Troy Youth Assistance in partnership with **The Rotary Club of Troy** will acknowledge and celebrate **Troy Youth who make exemplary, voluntary contributions to the Troy Community** at the 40th Annual Youth Recognition Awards Program on **May 2, 2012** at Athens High School.

The **nominees** must be **school-age Troy residents** and may be nominated for recognition in one of the following categories.

1. **Exceptional service to others:** Superior service and extensive volunteerism. Displaying extreme genuineness and concern for others, especially considering the youth's developmental age.
2. **Achievement by an individual who has overcome personal challenges and/or set an example for others:** Significant changes within the past year have been reflected by the youth's sincere attempt to turn around one's life. Included may be changes from negative to positive attitudes and behavior; actions displaying great achievements in personal growth and/or social development for a person of the youth's developmental age, or overcoming significant personal difficulties.
3. **Heroism /outstanding humanitarian act:** Act of self-sacrifice which demonstrates unusual courage and/or an act reflecting great concern for the welfare of another. Displaying considerable social awareness for a person of the youth's developmental age.
4. **Exceptional service by an individual within a club or organization:** Superior service and extensive volunteerism well beyond the norms of time, energy, and tasks of the other group members and/or the youth's developmental age. Giving of oneself without consideration of self-gain, election to office, and/or social merit.
5. **Exceptional service by a club or organization:** Superior service and extensive volunteerism well beyond the norms of time, energy, and tasks which define the club or organization.

In nominating an individual for one of these exemplary awards, please **include as much detail as possible and specific example/s** of the youth's service and/or personal achievement in your description. The Youth Recognition Selection Committee is an objective panel of judges who are not necessarily familiar with the nominee or with the nature and/or mission of the club/organization with which the nominee may be affiliated. **Lack of sufficient information from the nominator is detrimental to the selection of the candidate.**

Troy youth may be nominated for recognition of **service which occurred between January, 2011, and February, 2012.**



NOMINATION FORM
TROY YOUTH ASSISTANCE
YOUTH RECOGNITION AWARDS PROGRAM
May 2, 2012

FOR OFFICE USE ONLY
NO. _____

DEADLINE for RETURN: February 17, 2012

Please type or print clearly. Nominate only one youth on a single form. Duplicate this form if you have more than one nominee. The youth must be a school-age resident of the Troy School District. **ALL** of the following information must be provided; incomplete forms will not be considered. **Please include a picture (electronic ok) of the nominee, preferably, participating in the service, or a school picture.**

NAME _____

ADDRESS _____ CITY _____ ZIP CODE _____

SCHOOL _____ PARENT/GUARDIAN _____

E-Mail _____ HOME PHONE _____ BUS/CELL PHONE _____

AGE _____ GRADE _____ GENDER _____

CATEGORY OF NOMINATION: (SEE ATTACHED CATEGORY CRITERIA)

- Exceptional service to others
- Achievement by an individual who has overcome personal challenges and/or set an example for others
- Heroism/outstanding humanitarian act
- Exceptional service by an individual within a club or organization
- Exceptional service by a club/organization

Estimated number of hours for this activity _____

Is this youth receiving credit from any other club or organization for this activity ? Yes No
If yes, please explain. _____

Has this youth been previously nominated to TYA for this achievement or activity? Yes No

The nominee has voluntarily made a significant contribution to others, self, an organization, or a community. S/he has not received payment, merit within an organization, an award of any kind, or school course credit for his/her effort/s.

I agree to keep this nomination strictly confidential and to permit the Troy Youth Assistance/ Youth Recognition Selection Committee to notify this young person of his/her selection for an award.

NOMINATOR'S NAME AND ORGANIZATION _____

NOMINATOR'S ADDRESS _____ CITY _____ ZIP _____

PHONE _____ EMAIL _____ SIGNATURE _____

RETURN COMPLETED FORM NO LATER THAN
February 17, 2012 :

TROY YOUTH ASSISTANCE
4420 Livernois
TROY, MI 48098
FAX: 248-823-5240

troyyouthassistance@troy.k12.mi.us

FOR ADDITIONAL INFORMATION CALL 248/823-5095

