



**INDIVIDUAL NOMINATION FORM
TROY YOUTH ASSISTANCE
YOUTH RECOGNITION AWARDS EVENT**

FOR OFFICE USE ONLY

NO. _____

DEADLINE for RETURN: March 17, 2021

This year, because of COVID-19, Troy Youth Assistance will not be hosting its traditional Youth Recognition Awards Event. We recognize that this year has changed circumstances for many youth and their families. TYA wants to recognize those high school students who have set life goals and need a lift to achieve them. We will honor students for their planning and achievement skills, particularly those students who have overcome previous challenges to gain success and vision. Students will be eligible for a "Boost Grant" that can be used for continued education, certification or licensure costs, or for the purchase of professional equipment.

PLEASE TYPE OR PRINT CLEARLY. Nominate only one youth per form. The youth must be a high school age City of Troy resident or attending Troy Schools as a school of choice student. Both pages must be completed to be considered. **Please send a digital picture of the nominee, preferably a waist-up shot in .jpg format, and ensure that names are spelled correctly on this form,** as we may be printing legal documents based on this information. Nominee has not received payment or merit within an organization for their effort/s.

NOMINEE INFORMATION:

Nominee: _____

Phonetic Spelling: _____ Nominee Email: _____

School: _____ Grade: _____ Age: _____ Gender: M _____ F _____

Home Address: _____ City: _____ Zip: _____

Parent/Guardian: _____ Email: _____

NOMINATOR INFORMATION:

Title & Name: _____ Phone: _____

Nominator's Address: _____ City: _____ Zip: _____

Email: _____ Organization: _____

I agree to permit the Troy Youth Assistance / Youth Recognition Selection Committee to notify the nominee of their selection for an award.

Please save a copy of this 3-page nomination form and submit it by e-mail to Troy Youth Assistance along with a digital picture of the nominee in .jpg format.

**RETURN COMPLETED FORM NO LATER THAN
March 17, 2021**

**TROY YOUTH ASSISTANCE
4420 Livernois Rd.
Troy, MI 48098**

troyyouthassistance@troy.k12.mi.us

FOR ADDITIONAL INFORMATION: CALL 248-823-5095

DO NOT USE THE YOUTH'S NAME IN THIS SECTION OF THE NOMINATION FORM

School: _____ Grade: _____ Age: _____
Goal: _____

For the Nominator: there are 2 sections that must be completed to be considered for an award. An electronic picture of the nominee is also required.

Section 1:

Please describe (in up to 500 words total and do not use the youth's name) why this goal is important to the future of your nominee or the community, and describe any challenges that a "Boost Grant" in recognition of this youth's progress toward the established goal would be particularly helpful to overcome.

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DO NOT USE THE YOUTH'S NAME IN THIS SECTION OF THE NOMINATION FORM

Section 2:

Please convey these questions to your nominee and submit the answers here.

Questions for the Nominee:

(Please be as concise as possible, yet provide as much detail as possible, within your comfort level.)

-Please define the goal you have set for yourself.

-What have been the challenges to achieving this goal?

-What is the progress you have made toward this goal?

-What steps are still remaining to reach your goal?

-What financial assistance could help you reach this goal within the next six months?

(Please list the type of assistance needed and the cost and be specific. For example, if the assistance is added coursework, list where and when the course would be taken and the cost. Or, if it is professional licensing or certification, please list the agency and cost.)

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