

NOMINATION PROCEDURES

Eligibility Criteria

- The nominee must be a resident of Minnesota.
- The nominee's volunteer service must be accomplished **after reaching age 65**.
- Nominee must be **age 70 by June 1, 2017**.
- Nominee must currently do a volunteer activity that is unpaid and demonstrates commitment to their local community.
- A previous county winner not chosen as the state winner is eligible; however, a current year's nomination form must be completed.
- You may only nominate one individual per nomination form. Couple nominations will be disqualified.

Instructions

Explain why you are nominating this person for the Outstanding Senior Citizen award. It is helpful to give specific, detailed and precise examples to assist the judges in choosing the winners. Do not hesitate to interview the person you are nominating. Nomination does not need to be kept secret. You may also speak to people at the organizations where the individual volunteers. Political and religious organization involvement will only be considered when it benefits the community. All information will be held in confidence by judges. Information submitted is not returned unless a request is made.

Judges will look for:

- Diversity of accomplishments
- How this person has touched the lives of other people in the community
- Total scope of activities, including years of service and time commitment
- Variety of services performed and involvement in organizations
- Quantity of accomplishments and amount of service **after age 65**
- Quality of activities, especially innovative services
- Geographic area covered by their service
- Individuals are encouraged to submit up to three letters of recommendation that focus on the candidate's achievements. **No more than three letters will be used in the judging process.**

The nominations will be judged by three representatives from each of the following organizations: the Minnesota State Fair, the Minnesota State Fair Foundation and the Minnesota Federation of County Fairs.

Program is sponsored by



MALE 2017 Outstanding Senior Citizen Award Minnesota State Fair Nomination Form

*Sponsored by the Minnesota State Fair, the Minnesota State Fair Foundation
and the Minnesota Federation of County Fairs*

COUNTY NAME: _____

This form and information on this award program is located on our web site at:
www.mnstatefair.org. Click on the "Recognition Programs" link at the bottom of the home page.

List what the nominee (**age 70 by June 1 or older**) does for others in your organization or community after reaching the **age of 65**. Feel free to discuss your nomination with this person and collect needed volunteer activity information.

Send the information to the local County Fair by county fair date: _____

Winners will be selected and recognized at the local county fair. They will then be entered into the State Outstanding Senior Citizen Award competition. Outstanding seniors will be recognized for their service at the award ceremony at the State Fairgrounds on Senior Day, August 31, 2017.

COUNTY NAME: _____

Male Nominee Name:	Date of Birth:	Nominated by:
Address:		Address:
Home Phone: _____		Home Phone: _____
Work Phone: _____		Work Phone: _____

How do you know the nominee? _____

What was the nominee's occupation before age 65? _____

Signature: _____ Date: _____

Complete this form and mail it to the nominated senior's County Fair contact. A complete listing of the County Fair contacts can be found at: <http://www.mfcf.com/members.htm>.

FEMALE 2017 Outstanding Senior Citizen Award Minnesota State Fair Nomination Form

*Sponsored by the Minnesota State Fair, the Minnesota State Fair Foundation
and the Minnesota Federation of County Fairs*

COUNTY NAME: _____

This form and information on this award program is located on our web site at:
www.mnstatefair.org. Click on the "Recognition Programs" link at the bottom of the home page.

List what the nominee (age 70 by June 1 or older) does for others in your organization or community after reaching the age of 65. Feel free to discuss your nomination with this person and collect needed volunteer activity information.

Send the information to the local County Fair by county fair date: _____.

Winners will be selected and recognized at the local county fair. They will then be entered into the State Outstanding Senior Citizen Award competition. Outstanding seniors will be recognized for their service at the award ceremony at the State Fairgrounds on Senior Day, August 31, 2017.

COUNTY NAME: _____

Female Nominee Name:	Date of Birth:	Nominated by:
Address:		Address:
Home Phone: _____		Home Phone: _____
Work Phone: _____		Work Phone: _____

How do you know the nominee? _____

What was the nominee's occupation before age 65? _____

Signature: _____ Date: _____

Complete this form and mail it to the nominated senior's County Fair contact. A complete listing of the County Fair contacts can be found at: <http://www.mfcf.com/members.htm>.

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(Please make a copy of these three forms — use one for the female nominee and one for the male nominee. Copy additional pages as needed.)

Name of Nominee _____

Volunteer Activities

List the volunteer activities and benefits to the community/organization:

Volunteer activity/organization: _____

Activity or responsibility: _____

Time commitment: _____

Benefit to the community: _____

Volunteer activity/organization: _____

Activity or responsibility: _____

Time commitment: _____

Benefit to the community: _____

Volunteer activity/organization: _____

Activity or responsibility: _____

Time commitment: _____

Benefit to the community: _____

Volunteer activity/organization: _____

Activity or responsibility: _____

Time commitment: _____

Benefit to the community: _____

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Name of Nominee _____

Volunteer activity/organization: _____

Activity or responsibility: _____

Time commitment: _____

Benefit to the community: _____

Community Memberships

Tell us about community organizations or committees she/he belongs to. Be sure to list any positions or offices held by the nominee within these organizations.

Organization

Responsibilities

Time Spent

Organization	Responsibilities	Time Spent
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
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_____	_____	_____
_____	_____	_____
_____	_____	_____

Service Awards

List outstanding accomplishments, awards or honors she/he has received *after reaching age 65*.

Award

Year Received

Award	Year Received
_____	_____
_____	_____
_____	_____

