

Candidate Nomination Questionnaire

Dear District of Columbia Residents and Employees,

Hamilton Relay, the contracted service provider of Washington, DC, is seeking your assistance in identifying candidates for the Hamilton Relay 2017 Deaf Community Leader Award.

We are looking for individuals who are deaf or deaf-blind and who have been a positive influence in the District of Columbia, demonstrating commitment to volunteerism, leadership, advocacy and enhancing the lives of those around them. The award will be presented around Deaf Awareness Week in September.

Is there someone you wish to nominate for 2017?

Hamilton Relay Deaf Community Leader Award Recipients from previous years include: Dorian Fletcher, Amy Rousseau and Janice Rosen.

A questionnaire is attached to assist in providing information about your candidate, including a brief description about the individual and what this person has done that causes you to nominate him/her. Please send your nominations directly to me by August 31st via e-mail at lauren.cramer@hamiltonrelay.com. My contact information is included in my signature below.

Celebrating community leaders during Deaf Awareness Week in September is something we look forward to each year. Thank you in advance for your participation in nominating deserving individuals from your community.

Sincerely,

Lauren Cramer

Lauren Cramer Senior Relay Outreach & Marketing Manager Lauren.cramer@hamiltonrelay.com Mobile: (202) 215-3159 (Voice/Text)



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Hamilton Relay 2017 Deaf Community Leader Award

Due August 31, 2017 • PLEASE PRINT CLEARLY

Nominations may be made in ASL by submitting a video to Courtenay.StGermain@HamiltonRelay.com

Objective: To recognize an individual in each of Hamilton's contracted states who is deaf or deaf-blind and who demonstrates strong leadership, volunteerism and involvement within his/her community.

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Name of Candidate:
(Please note that this award is presented to one individual within your state each year. Organizations, schools, associations, groups of individuals and individuals who are deceased are not eligible for this award.)
Candidate's Address:
Phone #:
Please circle: Voice TTY CapTel VP Other
Email/Pager addresses:
The candidate: ☐ is deaf ☐ is deaf-blind
 How has the candidate been active and/or made an impact in his/her community? Please focus primarily on providing information pertaining to the volunteer efforts and accomplishments he/she has done outside of his/her career and/or regular job duties.
 List the complete names of associations, organizations, clubs or other activities in which your candidate has been involved. Include position(s) held, term length and any other pertinent details.



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What are the strongest points about the candidate?
Please list two references (other than yourself) and their contact information:
Reference #1:
Phone Number:
Email Address:
Reference #2:
Phone Number:
Email Address:
Please include your contact information:
Name:
Phone Number:
Email Address:

(Please feel free to include additional information and/or attach additional pages as needed.)

Thank you for submitting your nomination!