



southeastern association
of area agencies on aging

SOUTHEASTERN ASSOCIATION OF AREA AGENCIES ON AGING

2024 AGING IMPACT AWARD

NOMINATION FORM

NOMINEE'S INFORMATION

NOMINEE'S FULL NAME: _____

ADDRESS: _____

PHONE NUMBER: _____ EMAIL ADDRESS: _____

PUBLIC OFFICE HELD: _____ YEAR TERM ENDS: _____

OCCUPATION: _____ EMPLOYER: _____

WORK ADDRESS: _____

EDUCATION: _____

AWARD CATEGORY

INDICATE THE AWARD CATEGORY FOR WHICH THE INDIVIDUAL IS BEING NOMINATED. PLEASE SELECT ONLY ONE CATEGORY.

- NATIONAL AGING IMPACT AWARD
 REGIONAL/STATE AGING IMPACT AWARD
 LOCAL AGING IMPACT AWARD

SPONSORING AAA INFORMATION

SPONSORING AAA NAME: _____

CONTACT PERSON: _____ EMAIL ADDRESS: _____

WILL NOMINEE ATTEND SE4A

CONFERENCE: _____ Yes _____ No

(Please Note: The sponsoring AAA will be responsible for facilitating recipient notification and luncheon attendance.)

SUBMISSION INFORMATION

PLEASE RETURN COMPLETED FORM TO SARAJANE MELTON, AWARDS CHAIR. SUBMISSIONS MUST BE POSTMARKED OR RECEIVED VIA EMAIL NO LATER THAN **May 24, 2024**.

Sarajane Melton
Southwestern Commission AAA
125 Bonnie Lane
Sylva, NC 28779
sarajane@regiona.org
(828)586-1962

COMPLETION INSTRUCTIONS

PROVIDE NARRATIVE INFORMATION THAT DELINEATES WHY THE NOMINEE MERITS THE AWARD AND ADDRESSES THE IDENTIFIED TOPICS. IF ADDITIONAL SPACE IS NEEDED, PLEASE ATTACH TO THIS NOMINATION FORM AND ADHERE TO THE FOLLOWING REQUIREMENTS: MAXIMUM OF THREE (3) PAGES, 12 POINT FONT, DOUBLE-SPACED, AND NOMINEE’S NAME ON EACH PAGE.

NARRATIVE INFORMATION

DESCRIBE HOW THE WORK OF THIS PUBLIC OFFICIAL HAS RESULTED IN OUTCOMES THAT IMPROVED THE QUALITY OF LIFE FOR OLDER AMERICANS.

WHAT ARE THE OBSERVABLE AND/OR MEASURABLE OUTCOMES OF THE WORK DONE BY THE PUBLIC OFFICIAL. STATE IN TERMS OF NUMBER OR PERCENTAGE OF OLDER ADULTS IMPACTED.
