

Individual Information

PRESIDENT'S VOLUNTEER SERVICE AWARDS FORM B

INDIVIDUAL AWARD CERTIFICATION FORM





A separate form should be completed for each intended recipient of the President's Volunteer Service Award. Please type or print using blue or black ink. Photocopy this form as needed. The Award Order Form and payment MUST accompany this form. Please fax completed forms to **1-202-729-8033.**

| NAME | | | | | | | |
|--|-------------------------------------|--|--|--|--|--|--|
| STREET ADDRESS | | | | | | | |
| CITY | CTATE | ZIP | | | | | |
| PHONE () EMAIL | | | | | | | |
| Name preferred on certificate | | | | | | | |
| | | | | | | | |
| Volunteer Information | | | | | | | |
| How many hours did the nominee complete du | ing the 12-month period? | | | | | | |
| Was the nominee 14 years or younger at the co | mpletion of the hours?yes | no | | | | | |
| Was the nominee 15 to 25 years old at the com- | pletion of the hours?yes _ | no | | | | | |
| Has the nominee completed over 4000 hours of | | | | | | | |
| Where did the nominee perform the majority of | their volunteer service? | U.S. st | ate or country | | | | |
| Service Classification (Check the box in w | high most of the valunteer activity | took place | | | | | |
| Service Classification (Check the box in w | lich most of the volunteer activity | took place.) | | | | | |
| Includes volunteer activities such as | mentering ecoebing tutoring im | proving literacy in eroos | auch as reading and | | | | |
| finance, and volunteering to keep yo | 0. 0. | | such as reading and | | | | |
| Parks and Open Spaces | ang people engaged academican | / III education. | | | | | |
| Includes volunteer efforts to conserv | e and protect our parklands and (| ardens neighborhood cl | eanung and creating safe | | | | |
| playgrounds. It also includes creating | · | • | • | | | | |
| the environment and our natural reso | · | 3 and outdoor activities in | or individuals to enjoy | | | | |
| Healthy Communities | diocs. | | | | | | |
| Includes volunteer efforts to help the | elderly disabled diseased hunc | rv or homeless, and to ir | nnrove the economic health of | | | | |
| the community. These could include | | | • | | | | |
| resume building, career training, disc | <u>-</u> | | • • | | | | |
| local public health programs, micro- | | | and an in the state of the stat | | | | |
| Public Safety & Emergency Response | | | | | | | |
| Includes volunteer efforts for individu | als and families to make their hor | nes, and their communiti | es safer from the threats of | | | | |
| crime, terrorism, and disasters of all | | | | | | | |
| like Citizen Corps, Neighborhood Wa | | | · - | | | | |
| Global Health & Prosperity | • | | | | | | |
| Includes international volunteer efforts | by American professional serving | abroad through non-gov | ernmental organizations | | | | |
| and companies to share their skills in the | | • | • | | | | |
| HIV/AIDS prevention and treatment, he | | · · · · | = | | | | |
| & youth empowerment. | | | | | | | |
| Tell us more about the award recipient's s | ervice. (35 words or fewer) (C | PTIONAL) | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Domo swankia luformation (this continu | in antiqual) | | | | | | |
| Demographic Information (this section Gender Female | | | | | | | |
| | Male 36-49 | 50+ | | | | | |
| | | 50+ | | | | | |
| Ethnicity: Hispanic or Latino? | yes no | | | | | | |
| Alaska Native/ American Indian | Diagle / African Amor | ioon | \\/hito | | | | |
| | Black / African Amer | _ | White | | | | |
| Asian Education (Highest level completed) | Native Hawaiian or F | racific islander High School or GED | Undergraduate Degrae | | | | |
| Education (Highest level completed) | | _ | Undergraduate Degree | | | | |
| | 9-11 | Some College | Graduate/Professional Degree | | | | |

| Signature | DATE | |
|----------------------|------|--|
| Name of organization | | |
| · | | |

See reverse for Public Burden Statement and Privacy Act Notice.

OMB Control #: 3045-0086 Expiration Date: 02/28/2007

Public Burden Statement: The public burden for this collection of information is estimated to average 20 minutes per submission, including reviewing instructions, gathering the data needed, and completing the form. Comments on the burden or content of this instrument may be sent to the Corporation for National and Community Service, Office Public Affairs, 8th Floor, Attn: Ms. Rhonda Taylor, 1201 New York Avenue, N.W., Washington, D.C., 20525. The Corporation informs people who may respond to this collection of information that they are not required to respond to the collection of information unless the OMB control number and expiration date displayed are current and valid. (See 5 C.F.R.1320.5(b)(2)(i)).

Privacy Act Notice: The Privacy Act of 1974 (5 U.S.C. 552a) requires that the following notice be provided to you. The authority for collecting this information is contained in Executive Order 13285, signed January 29, 2003. The principle purpose for collecting this information is to recognize individuals, schools and organizations that excel in their efforts to support volunteer service and civic participation, especially with respect to students in primary and secondary schools, and institutions of higher learning. The information will be used to select winners of the President's Volunteer Service Awards and the Call to Service Awards. Nominations for these awards are voluntary. All information that is provided to the Corporation and its administrating organization will not otherwise be disclosed to entities outside of the Corporation without the approval of the individual or organization nominated for the award.

Instructions for FORM B (Individual Certification Form)

All President's Volunteer Service Awards must be verified and issued through institutions which we call Certifying Organizations (CO). If the nominee is an individual, family, or group who is seeking the PVSA and are associated with any organization such as a faith-based institution, school, higher education, nonprofit and community based organization, business, labor union, civic or service club, membership and trade association, and federal, state or local government agency, please ask for one of these to become a CO and verify your service.

There is a nominal charge for the recognition packet. Some organizations may cover the cost of the packet. If the CO is unable to cover this cost, it is appropriate for the individual volunteer, if asked, to help cover the cost.

To earn an award, individuals, families and groups must keep a record of volunteer activities and hours served. This record of service may be kept as a diary or calendar or tracked online with the USA Freedom Corps Record of Service available on the President's Volunteer Service Award site at www.presidentialserviceawards.gov. An individual between the ages of 5 and 14, must complete a minimum of 50 service hours during a 12-month period. An individual aged 15 and older, must complete a minimum of 100 service hours during a 12-month period.

Individual Information:

Please fill out the individual information for each recipient, giving full address including city, state, zip and phone number.

Volunteer Information: Please answer all questions.

How many hours did the awardee complete during the 12-month period? Please fill in number of hours. The 12-month period does not depend on a calendar year, school year, or any other time period other than the 12-month period preceding the application for the PVSA.

Has the nominee completed over 4000 hours of service over his/her lifetime? If so this individual has earned the President's Call to Service Award. During his 2002 State of the Union address, President George W. Bush called upon every American to get involved in strengthening America's communities and sharing America's compassion around the world. He called on each of us to dedicate at least two years, or 4000 hours, over the course of our lives to the service of others.

Where did the individual perform the majority of their volunteer service? Please fill in the blank with the location whether a U.S. state or other country, where the volunteer performed the majority of service. Service can be in many locations, so please just indicate where the majority of service took place.

Primary Service Area:

Descriptive information under each category provides examples of appropriate activities. This is meant to be descriptive rather than exclusive and describes some specific activities that would qualify.

Optional Information:

Age: Please check appropriate age of individual at the completion of hours.

Race: Please mark all that apply.

Ethnicity: Does the individual consider himself or herself as Hispanic or Latino? Yes or no

Education: Please fill in the blank for the highest level completed.