



METROPOLITAN VOLUNTEER MANAGEMENT ASSOCIATION

## **2020 Metropolitan Volunteer Management Association (MVMA) Volunteer Director of the Year Nomination Form**

**Please complete and return the nomination form by 5:00pm (CST) on Friday, October 23, 2020.**

**Email to:** [strategicVP@mvma-stl.org](mailto:strategicVP@mvma-stl.org)

### **Award Eligibility:**

- At least two years of experience as a volunteer manager
- Volunteer management must constitute of at least 50% of the nominee's job duties
- Current MVMA member
- Nominated by a supervisor, colleague, or fellow MVMA member. Self-nominations will not be accepted.

### **Selection Criteria**

- Demonstrate volunteer program managerial excellence
- Continued commitment to volunteer engagement and promoting volunteerism
- Innovations in the field
- Significant contributions within the previous calendar year will carry more weight than those in the past.

### **Nominations**

**In no more than two pages, please thoroughly address the following three questions:**

- 1.** How does the nominee demonstrate managerial excellence? Consider volunteer position development, screening processes, orientation and training, recognition of service, etc.
- 2.** What impact has the nominee had at his or her agency? How has the nominee shown initiative and creativity to further your agency's mission?
- 3.** How has the nominee promoted the profession of volunteer management through community volunteerism, involvement with professional organizations, publishing articles, etc.?

**Please provide a copy of the nominee's job description.** You are also encouraged to submit articles, photos or other helpful information.



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**Application Instructions:**

<b>Name of Nominee:</b>	
Title:	
Organization Name:	
Address:	
City, State, Zip:	
Telephone:	Fax:
Email:	
Number of years in current position:	Number of years in field:
Percent of time spent managing regularly-scheduled volunteers:	One-time volunteers:
<b>Name of Nominator:</b>	Relationship to Nominee:
Organization Name:	
Address:	
City, State, Zip:	
Telephone:	Fax:
Email:	