Pennsylvania Association of Senior Centers

2017 Senior Center of the Year
Nomination & Criteria Qualifications

Name of Center _____ Phone # _____

Director/Center Manager _____

Parent Organization/Affiliation (if applicable): _____

Address _____

Email Address: _____

Submitted by: _____Phone # _____ Email: _____

The following questions have been developed by the PASC Public Relations Committee to help ensure that each nominee is given equal consideration during the judging of the Senior Center of the Year. The Senior Center should demonstrate a continuing and positive impact on the community. **Center must be a member of PASC to be eligible.**

The completed form must be returned by August 15, 2017 to Tammy Miller, Windy Hill on the Campus, 1472 Roth's Church Road, Spring Grove, PA 17362 or email at: millert@windyhillonthecampus.org.

- Please include the Center's mission statement.

- Briefly describe why you feel this Center should be the recipient of the Senior Center of the year?

- Describe one specific program or activity that demonstrates the center's commitment to service to its members and the community.

Pennsylvania Association of Senior Centers

2017 Senior Center Professional of the Year
Nomination & Criteria Qualifications

Name of Nominee _____ Phone # _____

Center Name: _____

Parent Organization (if applicable): _____

Address _____

Email: _____

Submitted by: _____Phone # _____ Email: _____

The following questions have been developed by the PASC Public Relations Committee to help ensure that each nominee is given equal consideration during the judging of the Senior Center Professional Award. PASC Board members do not qualify for this award. **Center must be a member of PASC.**

The completed form must be returned by **August 15, 2017** to Tammy Miller, Windy Hill on the Campus, 1472 Roth's Church Road, Suite 103, Spring Grove, PA 17362 or email at millert@windyhillonthecampus.org.

- Briefly describe why you feel this person should be the recipient of the Senior Center Professional of the year?

- Summarize the continuing service of the nominee with other community organizations.

- List any other pertinent information that may be helpful, such as accomplishments or awards.

Pennsylvania Association of Senior Centers

2017 Senior Center Volunteer of the Year
Nomination & Criteria Qualifications

Name of Nominee _____ Phone # _____

Email Address: _____

Center Name: _____

Parent Organization or Affiliation (if applicable): _____

Address _____ Center #: _____

Submitted by: _____Phone # _____ Email: _____

The following questions have been developed by the PASC Public Relations Committee to help ensure that each nominee is given equal consideration during the judging of the Senior Center Volunteer of the Year.

The completed form must be returned by August 15, 2017 to Tammy Miller, Windy Hill on the Campus, 1472 Roth's Church Road, Suite 103, Spring Grove, PA 17362 or email at millert@windyhillonthecampus.org.

- Briefly describe why you feel this person should be the recipient of the Senior Volunteer of the year?

- Describe the nominee's commitment through volunteering in activities and programs designed for older adults.

- List any other pertinent information that may be helpful, such as accomplishments or awards.