



Your Helping Hand of North America 501(c)(3)  
9957 Moorings Drive, Suite 203  
Jacksonville, FL 32257  
Tax Id #06-1701831  
yourhh@gmail.com

## Nomination Form

Nominee Name \_\_\_\_\_ Date \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State Zip Code

Telephone # ( ) \_\_\_\_\_ Other Phone # ( ) \_\_\_\_\_

Nominated by \_\_\_\_\_ Telephone # ( ) \_\_\_\_\_

Division: ☐ Food/Clothing Bank ☐ Mentor/Educator ☐ Medical ☐ Small Business ☐ Shelter

Has the nominee received a YHH Grant in the past (that you know of)? ☐ No ☐ Yes-If so, what year? \_\_\_\_\_

Has the nominee volunteered with YHH ☐ Yes ☐ No

Are they currently an educator / school district employee? ☐ No ☐ Yes - (if yes, complete the employment section)

### EMPLOYMENT SECTION

EMPLOYER	TELEPHONE ( )	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
		FROM	TO	
ADDRESS				
JOB TITLE		YEARS AS AN EDUCATOR		

WHY DOES THIS NOMINEE DESERVE THIS GRANT?: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WHAT MAKES THIS NOMINEE STAND OUT/DIFFERENT FROM OTHER EDUCATORS?: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HAS THIS NOMINEE RECEIVED ANY OTHER AWARDS THAT YOU'RE AWARE OF?: \_\_\_\_\_

**WHO ELSE WILL SPEAK HIGHLY OF THIS NOMINEE**  
List the name, relationship, number of years acquainted, and phone number of three references. (No relatives please).

NAME	RELATIONSHIP	YEARS ACQUAINTED	EMAIL ADDRESS	PHONE NUMBER
				(    )
				(    )
				(    )

*I certify that all the information I have provided is true, complete and correct.*

I authorize YHH to investigate all statements contained on this nomination form. I understand that any misrepresentation or omission of facts is cause for immediate disqualification.

I understand that I should also inform the nominee of their nomination, so they are prepared when a YHH representative calls to obtain additional information about the nominee.

**Nominator's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

