



**The PRESIDENTIAL SERVICE CENTER (PSC)  
DISTINGUISHED SERVICE MEDAL (DSM)**

**Nomination Form**

*Administered and awarded by:  
The Presidential Service Center members holding valid Presidential Service Badges (PSB) with valid serial numbers and having served at the White House Military Office (WHMO)*



## NOMINATION ELIGIBILITY AND SUBMISSION GUIDELINES

### ELIGIBILITY

1. Nominees must have been engaged in volunteer activities for a **minimum of ten years** and benefited a community or communities in a substantial, important or unique way.
2. Students receiving course credits for their volunteer activities are ineligible **unless** the nomination is based on volunteer service that extends **beyond** the course requirements, in which case it must be clearly indicated in the nomination statement.
3. National Service volunteers must be nominated for service **above and beyond** that which is required of them in their national service program. Volunteer time recorded in a national service program will not be eligible.
4. Previous award recipients from within the past 40 years are ineligible.
5. Nominees are eligible if they received any single, investigated portion, of compensation for their service.
6. Nomination cannot be based upon court-mandated community service.
7. Nomination cannot be based upon serving as a "loaned executive."
8. Self-nominations are **not** allowable.
9. Family members may **not** nominate another family member for an award.
10. Group/team and corporate volunteerism nominations can be made by those **external** to the group/team or corporation/business.
11. **All nomination submission requirements listed below must be met.**
12. Director of Volunteers who are paid for their service must be nominated in the non-volunteer service category.

### IMPORTANT SUBMISSION REQUIREMENTS

1. All nominations must be submitted on the nomination form.
2. **Only fully completed nomination forms will be accepted. Sections 1-6 must be completed.** Incomplete nominations will not be considered for the award. All forms are to be scanned as a single .pdf and submitted. Any other form of submittal, such as on paper via mail, facsimile or incorrect scanning (such as independent graphic files) will be rejected. Individuals desirous of nominating but whom are unaware of modern computers and software programs are encourage to modernize their own functions or employ someone who works in the field of business.
3. While we regret any inconvenience it may cause, **all nominations must be typed. Handwritten forms will not be accepted.** Adobe Acrobat for free offers typing onto this form.
4. Two reference letters typed and signed are **required** for each nomination. These can be submitted via email.
5. The nomination form **must** be signed and dated by the nominator. Forms without these required, dated signatures will be considered as incomplete and not considered for the award.
6. The nominator may **not** serve as one of the references.

## **AWARD SELECTION**

- Award selections are based on the nominee's volunteer efforts and commitment of time, accomplishments, community impact and enhancement of the lives of others, as described on the nomination form.
- Nominations are received and evaluated at the potential nominee's local level first. For instance, if it is a church, then that group or leader may elect to review all nominations first, prior to submitting.
- The Presidential Service Center Seated Tribunal will select award recipients based on merit and eligibility. Recipients are selected without regard to race, religion, gender, national origin, or physical/mental disability. Recipients will be codified with a serial number and subject to having their name stripped from the Master Roll and revocation due to droit moral standards applied in society. If the Seated Tribunal selects and agrees to award a person they will add their name with criteria to a serial number.
- Only members of the Center, with a valid Presidential Service Badge (PSB) and serial number may sit on any tribunal. No other member of society ever will.
- A senior, US Military Retired member will always officiate any tribunal and must also hold a valid PSB, in good standing.
- Members of the Presidential Service Association or Presidential Service Center holding a valid PSB, but not US Military Retired, make up the bulk of a tribunal with the authority to judge, adjudicate on, or determine claims or disputes.

# NOMINATION FORM

From

## SECTION 1 – NOMINATION CATEGORIES (COMPLETION REQUIRED)

### **VOLUNTEER SERVICE CATEGORIES**

***NOTE: The nominee may fit multiple categories. Please select ALL that apply to their service.***

- Individual:** An individual who volunteers.
- Family:** A family that volunteers together on the same project(s).
- Group/Team:** A group or team of two or more people that volunteer together on the same project(s) under a group or team name.
- Youth:** A person (age 18 or younger) who volunteers.
- Senior:** A person (age 55 or older) who volunteers.
- Mentor:** An individual volunteer who has demonstrated an outstanding commitment to working with youth (ages 18 and younger) in a mentoring capacity and/or been actively engaged in other activities that support a mentoring program.
- Faith-Based:** An individual, family, group/team, youth or senior that volunteers through a faith-based community organization.
- Disaster:** An individual, family, group/team, youth or senior who volunteers in disaster preparedness, response, recovery or mitigation activities. (This category does not include paid first responders.)
- National Service:** An individual member of a National Service program (AmeriCorps, VISTA or Senior Corps) who has demonstrated outstanding volunteer service. The volunteer service must be above and beyond the requirements of the designated program.
- Corporate/Business:** A corporation or business that has made a substantial impact in the community by promoting service to their employees through engaging in volunteer activities and/or by providing paid time for employees to volunteer for local organizations and/or agencies.
- Perseverance in Volunteerism:** An individual volunteer who has overcome significant personal obstacles (mental and/or physical) in order to engage in service to others.
- Lifetime Achievement:** An individual who has exhibited a lifelong commitment to volunteerism and community service. Nominees must have made a substantial and long-term sustained impact in the community as a result of their service efforts.

### **NON-VOLUNTEER SERVICE CATEGORY**

- Director of Volunteers:** A paid staff member who exceeds expectations of good volunteer management skills including recruitment, training, coordination, risk management, evaluation, retention and recognition of volunteers. *Other related job titles may include Volunteer Program Director or Manager of Volunteers.*

**SECTION 2 – Nominee Information**  
**(COMPLETION REQUIRED) COMPLETE ONE BOX ONLY ON THIS PAGE**

**PLEASE COMPLETE THIS BOX FOR THE FOLLOWING CATEGORIES OF VOLUNTEER SERVICE:**  
**Individual, Youth, Senior, Mentor, Faith-Based, Disaster,**  
**National Service, Perseverance in Volunteerism, or Lifetime Achievement**

**Title:**  Ms.  Mrs.  Mr.  Dr.  Other \_\_\_\_\_

**Nominee’s First Name** \_\_\_\_\_

**Middle Name** (if applicable) \_\_\_\_\_

**Last Name** \_\_\_\_\_

**Suffix**  Jr.  Sr.  III  Other \_\_\_\_\_

**Home Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**PLEASE COMPLETE THIS BOX FOR THE FOLLOWING CATEGORIES OF VOLUNTEER SERVICE:**  
**Family, Group/Team, or Corporation/Business**

**Family, Group/Team, or Business Name** (e.g. Smith School Volunteers) \_\_\_\_\_

**Suffix** (if applicable)  Co.  Inc.  LLC  Other \_\_\_\_\_

**Contact’s Title**  Ms.  Mrs.  Mr.  Dr.  Other \_\_\_\_\_

**Contact’s First Name** \_\_\_\_\_

**Contact’s Last Name** \_\_\_\_\_

**Suffix**  Jr.  Sr.  III  Other \_\_\_\_\_

**Address Line 1** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**NOTE:** *If the family, group/team, or corporation/business is a recipient, the contact person listed above will accept the award on behalf of the family, group/team, or corporation/business.*

**PLEASE COMPLETE THIS BOX FOR NON-VOLUNTEER SERVICE IN THE FOLLOWING CATEGORY:**  
**Director of Volunteers (paid staff member)**

**Title:**  Ms.  Mrs.  Mr.  Dr.  Other:

**Nominee’s First Name** \_\_\_\_\_

**Middle Name** (if applicable): \_\_\_\_\_

**Last Name** \_\_\_\_\_

**Suffix:**  Jr.  Sr.  III  Other \_\_\_\_\_

**Home Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Agency/Organization (Employer)** \_\_\_\_\_

Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_  
Email Address \_\_\_\_\_

**SECTION 3 – Nominator and Reference Information  
(COMPLETION REQUIRED)**

**IMPORTANT REQUIREMENTS FOR THIS PAGE**

1. Two references with attached letters are required.
2. The nominator and references must sign and date the page.
3. Forms without the required dated signatures will not be accepted.
4. The nominator may not also serve as one of the references.

**NOMINATOR**

Name \_\_\_\_\_  
Relationship to Nominee (i.e. volunteer supervisor) \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email Address \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**REFERENCES**

**2 references are required** (*those who are familiar with nominee's volunteer service*)

**REFERENCE #1**

Name \_\_\_\_\_  
Relationship to Nominee \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email Address \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

~AND~

**REFERENCE #2**

Name \_\_\_\_\_  
Relationship to Nominee \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email Address \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**SECTION 4 – Organization Information  
(COMPLETION REQUIRED)**

Organization(s) served by nominee.

**ORGANIZATION #1**

Organization Name \_\_\_\_\_  
Volunteer Job Title(s) \_\_\_\_\_  
Total length of time nominee has served this organization \_\_\_\_\_  
Nominee’s typical frequency and duration of service (*example-5 hours per day for 3 days each week*) \_\_\_\_\_  
Nominee’s primary volunteer duties \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*\*If nominee has served at more than one organization this year, please complete the supplemental page of this nomination form.*

**SECTION 5 – Nomination Statement  
(COMPLETION REQUIRED)**

Please explain the main reasons this nominee is being nominated.

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





**SUPPLEMENTAL PAGE – Additional Organizations Served by Nominee**

Nominee Name: \_\_\_\_\_ County \_\_\_\_\_

**ORGANIZATION #2**

Organization Name \_\_\_\_\_  
Volunteer Job Title(s) \_\_\_\_\_  
Total length of time nominee has served this organization \_\_\_\_\_  
Nominee's typical frequency and duration of service *(example-5 hours per day for 3 days each week)* \_\_\_\_\_  
Nominee's primary volunteer duties \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ORGANIZATION #3**

Organization Name \_\_\_\_\_  
Volunteer Job Title(s) \_\_\_\_\_  
Total length of time nominee has served this organization \_\_\_\_\_  
Nominee's typical frequency and duration of service *(example-5 hours per day for 3 days each week)* \_\_\_\_\_  
Nominee's primary volunteer duties \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ORGANIZATION #4**

Organization Name \_\_\_\_\_  
Volunteer Job Title(s) \_\_\_\_\_  
Total length of time nominee has served this organization \_\_\_\_\_  
Nominee's typical frequency and duration of service *(example-5 hours per day for 3 days each week)* \_\_\_\_\_  
Nominee's primary volunteer duties \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SUPPLEMENTAL PAGE – Family Volunteerism**

**\*NOTE: This page should be completed only for Family Volunteering nominees**

**Nominee Name:** \_\_\_\_\_ **County** \_\_\_\_\_

**Family Member #2**

**Title:**  Ms.  Mrs.  Mr.  Dr.  Other \_\_\_\_\_  
**First Name** \_\_\_\_\_  
**Middle Name** (if applicable) \_\_\_\_\_  
**Last Name** \_\_\_\_\_  
**Suffix** (if applicable)  Jr.  Sr.  III  Other \_\_\_\_\_

**Family Member #3**

**Title:**  Ms.  Mrs.  Mr.  Dr.  Other \_\_\_\_\_  
**First Name** \_\_\_\_\_  
**Middle Name** (if applicable) \_\_\_\_\_  
**Last Name** \_\_\_\_\_  
**Suffix** (if applicable)  Jr.  Sr.  III  Other \_\_\_\_\_

**Family Member #4**

**Title:**  Ms.  Mrs.  Mr.  Dr.  Other \_\_\_\_\_  
**First Name** \_\_\_\_\_  
**Middle Name** (if applicable) \_\_\_\_\_  
**Last Name** \_\_\_\_\_  
**Suffix** (if applicable)  Jr.  Sr.  III  Other \_\_\_\_\_

**Family Member #5**

**Title:**  Ms.  Mrs.  Mr.  Dr.  Other \_\_\_\_\_  
**First Name** \_\_\_\_\_  
**Middle Name** (if applicable) \_\_\_\_\_  
**Last Name** \_\_\_\_\_  
**Suffix** (if applicable)  Jr.  Sr.  III  Other \_\_\_\_\_

**Family Member #6**

**Title:**  Ms.  Mrs.  Mr.  Dr.  Other \_\_\_\_\_  
**First Name** \_\_\_\_\_  
**Middle Name** (if applicable) \_\_\_\_\_

**Last Name** \_\_\_\_\_

**Suffix** (if applicable)  Jr.  Sr.  III  Other \_\_\_\_\_