

National Headquarters 860 Dolwick Drive Erlanger, KY 41018 tel 859-441-7300 toll free 877-426-2838 dav.org Washington Headquarters 1300 I Street NW, Suite 400W Washington, DC 20005 tel 202-554-3501

DAV and DAV Auxiliary Volunteer of the Year Awards

The DAV Volunteer of the Year Awards are awarded annually by DAV in recognition of extraordinary volunteer dedication to the needs of ill and injured veterans through the VA Voluntary Service (VAVS) or Local Veterans Assistance (LVAP) programs.

Only DAV and DAV Auxiliary members who have contributed hours through the programs above are eligible for this prestigious award. An award will be presented to an outstanding volunteer from both the DAV and DAV Auxiliary at the DAV National Convention. Round-trip airfare (nonrefundable economy class), hotel accommodations, and General Service Administration (GSA) meals per diem for three days for each of the winners and a companion. In addition, all individual nominees receive a certificate recognizing their contributions.

We encourage your whole-hearted participation in the nominations for the Volunteer of the Year Award. Department commanders and voluntary service program managers should submit nominations to this office no later than Feb. 28, 2025.

Please return completed forms for one DAV and one DAV Auxiliary volunteer to DAV National Headquarters. Department commanders with more than one VA facility in their state may submit one DAV and one DAVA volunteer from each facility. Please feel free to copy the nomination forms as needed or if you have any additional questions contact Voluntary Services Director John Kleindienst at vavs@dav.org or (859) 442-2056.

Thank you for your efforts in making 2024 a year to remember. What better way is there to honor volunteers who do so much for America's ill and injured veterans! We look forward to hearing from you no later than Feb. 28, 2025.

Barry**y**A. Jesi**r**oski National Adjutant

JMB:dsb



2025 Hospital and Voluntary Services Award Nomination Form Volunteer of the Year

This nomination is for: $\ \square$ DAV $\ \square$ DAV Auxiliary

Nominee's Name			Date of Birth	/
Address				
Phone	Email			
VAMC Name				
VAMC Station Code	Citv			State
VAVS Program Manager				
NOTE: THE NOMINEE MUST BE A DAV OR DAV AUXILIARY N				
Please answer the following questions. (Attach additiona	al sheets as needed.)			
1. Total years as a volunteer:				
2. Lifetime volunteer hours:				
3. How does the volunteer directly improve the lives of ver	terans:			
4. How does the volunteer's assignment directly affect par	tient morale?			
5. In what ways does the volunteer positively affect other	volunteers?			
6. Please explain why the volunteer's assignment is valual	ble to you.			
7. The volunteer's dependability is: Fair Good	□ Excellent			
			□ 0 "	
8. The volunteer's assignment is: Between 8 a.m. and	I 5 p.m.	□ Weekends	□ On call	
9. Average hours volunteered per week:				

Rev (9/24)

2025 Hospital and Voluntary Services Award Nomination Form Volunteer of the Year for: DAV DAV Auxiliary Nominee's Name ___ 10. Please describe any special aspects of the volunteer you are nominating. **Approved by** (requires at least one signature) DAV Department Commander VAVS Program Manager Date When submitting your nomination, please include the following items: ☐ Recent photo of nominee, suitable for publicity purposes. Acceptable formats include: (1) glossy print, at least 4" x 6" (2) CD/USB drive containing a JPEG image measuring at least 4" x 6" and 300 ppi or higher ☐ Nominee's signed consent (below) Optional: Photos of the nominee volunteering **Consent Form** _____, hereby authorize DAV to use my name, photo and biographical information in connection with the National Commander's Awards Program. Signature

Please submit your nomination by February 28, 2025 to the Voluntary Services Department via email at **volunteerawards@dav.org** or via postal mail at the address below.

DAV National Headquarters National Convention Awards 860 Dolwick Drive Erlanger, KY 41018