|  | **Nomination Form**To be completed by the Sponsoring Organization/Group | Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| --- | --- | --- |

 Please write legibly! To return the form electronically, email it to Info@Gift-A-Lift.org

| **Nominee’s Name** |  | Phone Number |  |
| --- | --- | --- | --- |
| Email Address |  |
|  Address |  | Age |  |
| How long in Foster or Extended Foster Care? |  |
|  School Attending |  | GPA |  |
|  Employed By |  | Location |  |
|  Job role |  | How long |  |
|  Any accidents or  tickets? Describe |  | Has a valid driver’s license? |  |
| **Sponsoring Organization’s Name** |  | Phone Number |  |
|  Address |  | Email Address |  |
|  Primary Contact |  | Phone Number |  |
| Email Address |  |
| What is the Nominee’s Current Situation and why do they need a vehicle? |  |
| How do you provide support to the Nominee and will you continue to do so? |  |
| How will the Nominee be able to keep insurance and the recommended maintenance plan? |  |
| Additional Information |  |

(Please attach another page if needed)