

**Youth Volunteer Award 2015**

**NOMINATION FORM**

The Selection Board of the National Volunteer Award, appointed by the Malta Council for the Voluntary Sector, will receive the nominations for this award. Nominations must be made through this form, in line with the regulations outlined below.

**A. REGULATIONS.**

**1. The aim of the Award.**

* 1. The **Youth Volunteer Award** shall be awarded to a Volunteer between the age of 16 and 30 years. This award shall have the same aims as the National Volunteer Award and has the main scope to promote volunteering amongst young people.

**2. Eligibility criteria.**

2.1 Nominees must be Maltese citizens and/or residents of Malta or Gozo,

2.2 Nominees for the **Youth Volunteer Award** must be between 16 years and 30 years old by the closing date for nominations.

3.3 Nominees must declare that he/she does not make any financial gains through the work done for the organisation.

**3. Conditions for participation.**

3.1 The voluntary work may be in any field, such as sports, social, humanitarian, ecological, cultural etc., but must be in accordance with the human rights and laws of Malta.

3.2 The voluntary work must have had some positive contribution towards a particular field and should ideally have served as an inspiration to others.

3.3 The Malta Council for the Voluntary Sector reserves the right to refuse nominations on ethical grounds.

**4. The nomination process.**

4.1 Nominations for the Award must be made by at least two persons who have been closely associated with the nominee through work or other activities,

4.2 Each nomination must clearly show that the nominee is qualified to compete for the Award. The form should be signed by both nominators.

**B. NOMINATION.***Personal details of the nominee*

**Name:**       **Surname:**

**Date of birth (dd/mm/yyyy):**      /     /

**Sex: male** **[ ]  female** **[ ]**

**Address:**

**Town/City:**       **Postcode:** **Country:**

**Nationality:**

**I.D. number:**

**Name of the nominee’s association: & VO number**

**Intervention sector of the association (e.g. sports, humanitarian, ecology, social, cultural):**

**Date when the voluntary work started:**

*Personal details of the nominator 1*

**Name:**       **Surname:**

**Address:**

**Town/City:**       **Postcode:**       **Country:**

**I.D. number:**

*Personal details of the nominator 2*

**Name:**       **Surname:**

**Address:**

**Town/City:**       **Postcode:**       **Country:**

**I.D. number:**

***One of the nominators must be an active administrator of the same Voluntary Organisation with which the nomiminee gives service.***

1. Please give a brief description of the nominee’s voluntary work. (not more than 200 words)

1. What does volunteerism mean for the nominee, and what motivates his or her work? Is the nominee guided by any particular vision? (not more than 200 words)

1. What are the short and long-term goals of the voluntary action, and which values or principles are being promoted? (not more than 200 words)

1. Where any concrete results achieved? If so, please describe. Remember to include the potential positive impact that the voluntary work could have in the near future. (not more than 200 words)

**This nomination form, along with the documents specified below, is to be sent electronically to:**

**mcvs.msdc@gov.mt**

**The closing date for nominations is Friday the 6th November 2015. Regrettably, late nominations cannot be considered.**

**Written proof to furnish (in pdf, doc, or jpg format):**

* **A signed letter from the organisation where the nominee has volunteered confirming the duration of the voluntary activity and the role of the nominee.**
* **A letter of parental/legal guardian consent for nominees below the age of 18.**

We the undersigned,      ,      and       declare to have read and accepted the rules of the competition.

**Date (dd/mm/yyyy):** **/****/**

**Nominee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_I declare that work carried out within\_the organisation is done on a voluntary basis and I make no financial gain directly or indirectly. \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature 1 (please type your full name):**

Nominator 1 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature 2 (please type your full name):**

Nominator 2 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature 3 (please type your full name):**