

NEIGHBOR OF THE YEAR NOMINATION FORM

City of Waterford
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DATE		NOMINEE NAME	
NOMINEE ADDRESS		NOMINEE PHONE #	
NAME OF PERSON NOMINATING	ADDRESS	PHONE #	RELATION TO NOMINEE
DATES AND TIMES OF GOOD DEEDS PERFORMED			
FREQUENCY OF GOOD DEEDS PERFORMED			
DOES THE NOMINEE RESIDE WITHIN THREE BLOCKS WHERE THE DEEDS OCCURRED?		IS THE NOMINEE RELATED TO THE PERSON THE DEEDS WERE DONE FOR?	
<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO	
<i>IF NO, CONSIDER NOMINATING FOR VOLUNTEER OF THE YEAR INSTEAD.</i>		<i>IF YES, CONSIDER NOMINATING FOR VOLUNTEER OF THE YEAR INSTEAD.</i>	
DID YOU PERSONALLY WITNESS THE PERFORMANCE OF THE GOOD DEEDS?	DESCRIPTION OF GOOD DEEDS PERFORMED (ATTACH SHEETS IF NEEDED)		
<input type="checkbox"/> YES <input type="checkbox"/> NO			

ATTESTATION BY THE NOMINATOR, THAT TO THE BEST OF THEIR KNOWLEDGE, THAT ALL THE GOOD DEEDS LISTED WERE PERFORMED BY THE PERSON NOMINATED.

NOMINATOR NAME	SIGNATURE