

## 2019 OUTSTANDING OLDER AMERICAN AWARDS NOMINATION FORM

### SELECTION OF MAUI COUNTY'S OUTSTANDING OLDER AMERICANS YEAR 2019

#### PURPOSE

- To honor older adults who contributed significantly to improving community life
- To encourage participation in community activities
- To honor significant contributions provided by volunteer caregivers to the community
- To recognize the exploration of new interests, endeavors, and accomplishments.

#### ELIGIBILITY

- Nominees are desired from all segments of the community.
- While they may be members of senior clubs, churches or other organizations, it is not mandatory that the nominee belong to an organization.
- The nominee must be age 65 years or older and a resident of Maui, Molokai, or Lanai. Points will be awarded for services provided in the community after attaining age 60.
- The following are not eligible: Past award *winner*s (those who have been selected as the Outstanding Male or Female Older American of Maui County), Council on Aging Members, and Maui County Office on Aging staff.
- Nomination papers may be submitted by the candidate, another individual or an organization.

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**Nomination DEADLINE: March 29, 2019 by 4:30pm in MCOA's office.**  
**Call 270-7755 to confirm receipt of forms.**

**Mail or Deliver Forms to:**  
**Maui County Office on Aging**  
**Attn: OOA Committee**  
**95 Mahalani Street, Room 20**  
**Wailuku, HI 96793**

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**Awards Ceremony and Luncheon**  
**THU- May 16, 2019**  
**11:00 am to 1:00 pm**  
**Kihei Community Center**

# NOMINATION APPLICATION

## Nominee's Information

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

M.I. \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

2<sup>nd</sup> Phone \_\_\_\_\_ Email \_\_\_\_\_

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## Nominator's Information

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

M.I. \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

2<sup>nd</sup> Phone \_\_\_\_\_ Email \_\_\_\_\_

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## Optional:

Nominator's Club or Organization Affiliation

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Nominee's Club or Organization Affiliation

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MCOA CODE:

OFFICE OF THE MAYOR  
 MAUI COUNTY OFFICE ON AGING  
**NOMINATION FOR MAUI COUNTY'S  
 2019 OUTSTANDING OLDER AMERICAN AWARDS**

**NOMINEE'S AGE:** \_\_\_\_\_ **BIRTH DATE:** \_\_\_\_\_

(Must be 65 years or older)

**VOLUNTEER SERVICE, LEADERSHIP AND/OR CAREGIVING ACTIVITIES AFTER AGE 60**

List services the nominee provided to the community, friends, neighbors, and/or family members and the capacity in which nominee served after age 60, and the approximate hours per month. ***\*For judging purposes, please do NOT state nominee's name.***

Service or Organization	Position in which served (example: president, founder, officer, member, volunteer, or volunteer supervisor)	Estimated Years of Service	Estimated Hours Volunteered Monthly
<i>Ex. Na Hoaloha</i>	<i>Ex. Home Visitor</i>	<i>Ex. 10 years</i>	<i>Ex. 30 hours</i>

MCOA CODE:

**HOW MANY PEOPLE WERE HELPED BY VOLUNTEER'S CARE, SERVICE OR ACTIVITIES?  
HOW WERE THEY HELPED? WHO BENEFITTED? Provide examples.**

*\*For judging purposes, please do NOT state nominee's name.*

**PERSONAL ACHIEVEMENTS AFTER AGE 60**

In the space below, provide brief information on the nominee's personal achievements, new activities or new occupations after age 60.

*\*For judging purposes, please do NOT state nominee's name.*

MCOA CODE:

**Explain why you feel this nominee deserves to be the Outstanding Older American 2019**

In the space below, provide your story, explanation, or justification in narrative form.

***\*For judging purposes, please do NOT state nominee's name. Replace nominee's name with "Nominee"***

MCOA CODE:

OPTIONAL BACKGROUND INFORMATION

-- WILL NOT BE USED FOR JUDGING PURPOSES --

Nominee's Name: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Occupation(s) prior to age 60:

Special Interests or Hobbies:

Family History (spouse, children, etc.):

Explain why this person should be selected as the 2019 Outstanding Older American in Maui County

MCOA CODE: