



WOMEN'S WAY UNSUNG HEROINE AWARDS 2011 Nomination Form

WOMEN'S WAY's Mission

WOMEN'S WAY raises money and public awareness to fight for and achieve women's equality, safety, self-sufficiency and reproductive freedom through women-centered funding, advocacy and education.

About the Unsung Heroine Awards

Each year, at the Powerful Voice Awards, WOMEN'S WAY honors two extraordinary local women and one outstanding WOMEN'S WAY agency representative with the Unsung Heroine Awards.

The **Unsung Heroine Award** recognizes, honors and celebrates the work of local women who have made significant contributions advancing the progress of women, girls and families.

The **Unsung Heroine Award, Agency Honoree** recognizes, honors and celebrates a client, volunteer, staff person or board member of one of our WOMEN'S WAY funded agencies or grantees and, in doing so, the work of that agency.

Award Criteria

1. The nominee is a resident of Bucks, Burlington, Camden, Chester, Delaware, Gloucester, Montgomery or Philadelphia counties.
2. Her beliefs and values are consistent with WOMEN'S WAY's mission which reads:
WOMEN'S WAY raises money and public awareness to fight for and achieve women's equality, safety, self-sufficiency and reproductive freedom through women-centered funding, advocacy and education.
3. She has not already received widespread recognition for the activities for which she is being nominated.
4. She has not received a WOMEN'S WAY award previously and is not an elected official.
5. She has made significant contributions to her community, specifically relating to women and girls.
 - a. If she works outside her home and is not being nominated as the Agency Honoree, these contributions have been above and beyond, or different from, her job.
 - b. If she is nominated as the Agency Honoree, the nominee must be directly associated with one or more of the WOMEN'S WAY member agencies as a client, volunteer, staff person or board member. Community Women's Fund Grantees must have received funding in the Fall 2010, Spring 2010 or Fall 2009 giving cycle.
6. She must be available to accept the award in person at the Powerful Voice Awards in May 2011.

Nomination Process and Deadline

Return the enclosed nomination form with all requested information no later **than Monday, January 3, 2011**. All those who have submitted a nomination will be contacted regarding the status of their nominee by March 2011. All nominations should remain **confidential** until a decision has been made.

Send to: WOMEN'S WAY
123 S. Broad Street, Suite 1399
Philadelphia, PA 19109
Attn: Unsung Heroine Awards

Questions

Contact: Cate Galbally, Manager of Special Events, 215/985-3322, cgalbally@womensway.org



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Please provide the name and contact information for your nominee:

Name: _____

Mailing Address: _____

Phone: _____

Email: _____

Fax Number: _____

Please indicate whether your nominee is a representative of a WOMEN'S WAY funded Member Agency or Grantee.

- NO.** My nominee is a local unsung heroine, not associated with a WOMEN'S WAY funded member agency or grantee receiving funding in the Fall 2010, Spring 2010 or Fall 2009 giving cycle.
- YES.** My nominee is a representative of a WOMEN'S WAY funded member agency or grantee receiving funding in the Fall 2010, Spring 2010 or Fall 2009 granting cycle. My nominee may therefore be a recipient of the Unsung Heroine Award as the Agency Honoree.

Signature of Executive Director or Board Chair of Represented Agency *Date*

- Agency: _____
- Nominee Role: _____
Staff Member, Board Member, Volunteer, Client

Please answer the following questions on a separate sheet(s) of paper. Please be sure your answers are numbered in accordance with the questions.

1. Why do you feel this person should be honored? Please describe how your nominee inspires positive social change in the lives of women and girls through her activities and contributions. Please include specific examples.
2. How long have you known the nominee? What has been your association with her? How long has the nominee been involved with the activity(ies) for which you are nominating her? If you are nominating her as an agency honoree, please indicate which agency she represents, and explain her relationship to the agency and how long she has been involved.
3. How are your nominee's belief and values consistent with WOMEN'S WAY's mission statement (please see page one for the WOMEN'S WAY mission)?
4. Please list any awards that you know your honoree has received to date for the activities described above.
5. Please feel free to make further comments and/or include additional information that you feel would help the selection committee make its decision.



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Please provide your contact information:

Name: _____
Relationship to Nominee: _____
Mailing Address: _____

Phone: _____
Email: _____
Fax Number: _____

References

Please provide the names and contact information of three people whom we may contact as references for your nominee. Please try to use three references with varying perspectives. Family members cannot be used as references.

Name: _____
Relationship to Nominee: _____
Mailing Address: _____

Primary Phone: _____
Primary Email: _____
Fax Number: _____

Name: _____
Relationship to Nominee: _____
Mailing Address: _____

Phone: _____
Email: _____
Fax Number: _____

Name: _____
Relationship to Nominee: _____
Mailing Address: _____

Phone: _____
Email: _____
Fax Number: _____