Empowering teen voice in Alaska

www.spiritofyouth.org

**Nomination for Recognition**

Name of individual or group:

School:

School district:

Age(s):

Address:

City, State, Zip:

Home phone:

Email:

**Your Name:**

Address:

Phone:

Email:**Other references (names and phone numbers):**

**If a group, name of adult adviser:**

Check the nomination category:

* Humanitarian
* Innovator
* Phoenix
* Visionary
* Role Model
* Discovery
* Dreamer
* Life-Saver

**Answer the following questions with as much detail as possible. Feel free to write on the back of this form.**

1. What is the youth-led or youth-initiated activity this person/group is involved in?

2. How does this person/group help others or improve the quality of life in the community? Include qualities that make the person/group interesting, unique or inspirational.

3. Does this project address a social problem or conflict in the community? If so, briefly describe.

4. What were the dates of the youth-led event or activity?

5. How did you hear about Spirit of Youth? (School, radio, friend, etc.)