

**USARHAW NA KOA AWARD FOR VOLUNTEER SERVICE NOMINATION FORM**

Please read carefully and complete all required information. Incomplete nominations will be returned without action.

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Please indicate the type of award for which the individual is being nominated: *(Youth Ages 10-17)*  
Cumulative Volunteer Contributions from 1 January 2017 to 31 December 2019.

- Lapel Pin (300+)       Bronze (500+)       Silver (750+)       Gold (1000+)
- Youth Lapel Pin (150+)       Youth Bronze (250+)       Youth Silver (400+)       Youth Gold (500+)

**Part I: Nominee Information – To be completed by Nominating Individual**

<b>Nominee (Volunteer) Name:</b> _____	<b>Rank:</b> _____
<b>Nominee Organization/Unit:</b> _____	
<b>Nominee Email Address:</b> _____	<b>Phone Number:</b> _____

**Nominator Rank & Name:**

**Nominator Email Address:**

**Nominator Phone Number:**

**Nominating Organization/Battalion POC:**

**Other organization(s) that Volunteer serves:**

**Signature of Individual Writing Nomination:**

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**Part II: Justification – To be completed by Nominating Individual**

1. Provide a justification in as much detail as possible using either BULLET or PARAGRAPH format.
2. Ensure the justification addresses the following:
  - a. Specific contribution(s) made by the Volunteer during the period listed.
  - b. How did this Volunteer improve the quality of the organization/unit and or for the USARHAW Community?
  - c. Any volunteer-related accomplishments, i.e., awards/recognition the Volunteer received from your organization/unit over the past year.

**JUSTIFICATION:** (For additional space please attach a continuation sheet.)

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**Part III: NOMINATION APPROVAL** – To be completed by the organization Chief or Director or the O-6 Commander/CSM or above. SIGNATURE VERIFIES ***nomination information only*** and does not automatically signify approval of the award. Assumption of Command orders must be attached in cases where the organization Chief or Director or BDE Commander/CSM is not able to approve the nomination. In cases where the unit is deployed, the Rear Detachment Commander or designee may sign the nomination. Subject to panel review.

**Name:**

**Rank:**

**Organization/Unit:**

**SIGNATURE:**

**SUBMISSION INSTRUCTIONS:** Packets can be digitally sent to Mary Ann Scott at maryann.c.scott.civ@mail.mil or hand carried to ACS, Bldg 690, 310 Brannon Rd, Schofield Barracks no later than 1630 on Friday, 6 March 2020.

Please verify registration & certified volunteer hours in WMIS and packet information PRIOR to submission of this nomination.

This nomination will be reviewed by the Installation Volunteer Awards Review Committee and approval will be based on a subjective review of the written justification in accordance with the established criteria.

**Incomplete nominations will be returned without action.**