**Young Ealing Foundation Awards**

1. **Form for Nominating a YOUNG PERSON (age 11-25)**

**Award category** (please select one per form)

|  |  |
| --- | --- |
| **Overcoming Adversity** | **Young Volunteer** |
| **Green Champion** | **Community Champion** |
| **Young Leader** |

**Person nominating**

|  |  |  |
| --- | --- | --- |
| Your name: |  | |
| I am a… | Young person | Youth worker |
| Parent / guardian / carer | Connexions PA / YOS worker |
| Resident | Teacher |
| Other (please state) | |
| Contact details: | Phone / mobile: | Email: |

**Your nomination**

|  |  |
| --- | --- |
| I would like to nominate: |  |
| Please use additional pages if required | |

|  |  |  |  |
| --- | --- | --- | --- |
| Address: |  | Contact details: | Mobile:  Email: |

**Please inform the young person / volunteer that you have nominated them.**

|  |  |  |
| --- | --- | --- |
| **Signed:** |  | **Date:** |

Please send your completed nomination form to: [Yevgeni@youngealingfoundation.org.uk](mailto:Yevgeni@youngealingfoundation.org.uk) by

**11.59pm Sunday 5th June2022**

**Young Ealing Foundation Awards**

1. **Form for nominating a YOUTH PROVIDER**

**Award category** (please select one **per form)**

|  |  |
| --- | --- |
| **Positive Opportunities Award (project)** | **Online & Physical Safety Award (project)** |
| **Mental Health and Wellbeing Award (project)** | **Volunteer of the Year (person)** |
| **Youth Professional of the Year (person)** |

**Person nominating**

|  |  |  |
| --- | --- | --- |
| Your name: |  | |
| I am a… | Young person | Youth worker |
| Parent / guardian / carer | Connexions PA / YOS worker |
| Resident | Teacher |
| Other (please state) | |
| Contact details: | Phone/mobile: | Email: |

**Your nomination** (please note word count for each section)

|  |  |
| --- | --- |
| Project name / Person’s name: |  |
| Brief description of project/individual  (75 words) |  |
| How did the project/person impact on young peoples lives?  (150 words) |  |
| Outcomes achieved and the evidence  (150 words) |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Project/ organisation address: |  | Lead workers’ contact details: | Telephone:  Email: |

**Please inform the project lead/ individual that you have nominated the project/ individual**

|  |  |  |
| --- | --- | --- |
| **Signed:** |  | **Date:** |

Please send your completed nomination form to: [Yevgeni@youngealingfoundation.org.uk](mailto:Yevgeni@youngealingfoundation.org.uk) by

**11.59pm Sunday 5th June 2022**