****

DIEHARD AWARD NOMINATION FORM

***Entry Deadline: 12 pm Noon, September 14, 2018***

**GENERAL INFORMATION:**

**Please Check one:**

🞏 PROFESSIONAL ADVOCATE

🞏 SELF-ADVOCATE/GRASSROOTS ADVOCATE

Nominee’s Name: Click here to enter text.

Nominee's Address: Click here to enter text.

Nominee's Phone Number: Click here to enter text. Email: Click here to enter text.

Role/Job Title: Click here to enter text. Years of Service: Click here to enter text.

Nominator’s Name: Click here to enter text.

Nominator's Address: Click here to enter text.

Nominator's Phone Number: Click here to enter text. Email: Click here to enter text.

Affiliation to Nominee: Click here to enter text.

#

**NOMINATION NARRATIVE:**

Please answer all four of the following questions. Narrative cannot be longer than 2 pages (including questions).

# Nominees must demonstrate some or all of these characteristics:

* Ongoing creativity and leadership toward system change that enhances the lives of individuals with disabilities and their families throughout Wisconsin.
* Excellence in leadership on disability advocacy activities in their community or on the state or federal levels.
* Ongoing creativity and leadership toward system change in areas of community living, employment housing, healthcare, and education that enhance the lives of individuals with disabilities and their families throughout Wisconsin.
* Ongoing advocacy leadership toward Self-Determination and Self-Direction principles, activities, and outcomes.
* Commitment to growing communities of support that demonstrate quality, compassion, and integrity.
* Experience in contacting local, county, state or federal policymakers.
* Promotes values of independence, productivity, inclusion, and self-determination
* Continually sets a high standard of excellence by honoring the importance of people with disabilities and their families.
* Commitment to growing self-advocacy in Wisconsin.
* Commitment to ensuring people in unserved or underserved communities from diverse cultural and economic backgrounds have a voice.

**Nomination Narrative Questions**

1. Describe the nominee’s accomplishments and commitment to advocacy. How has the nominee performed above and beyond expected? Click here to enter text.
2. Tell us how the nominee has demonstrated leadership, creativity, and expertise that have benefited others and/or their community. Click here to enter text.
3. Tell us how the nominee has reached out to people with disabilities from culturally diverse backgrounds. Click here to enter text.
4. Tell us why the nominee is a positive role model (a superhero) for others. Click here to enter text.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Submit your completed form no later than noon on September 14, 2018 to:**

**Mail:** BPDD/Awards, 101 E. Wilson St., Room 219 \*\* Madison, WI 53703

**Fax:** 608-267-3906 \*\* **Email:** fil.clissa@wisconsin.gov