

***Kiwanis Club of Auburn, New York***  
***P. O. Box 791***  
***Auburn, New York 13021***

***Kiwanis Adult Service to Youth Award***  
**(Ages 19 & over)**

**STATEMENT OF PURPOSE**

The Kiwanis Adult Service to Youth Award is intended to identify and honor an individual from a human service organization or group in the Cayuga County area that has provided exemplary service to young people in the previous year. In so doing, we hope to focus public attention on the work of the agency, and the individual, in order to inform and educate the general community as to the value and scope of their work.

In more general terms, we intend this award to heighten the awareness of both need and service in our area. It is our assumption that both the special needs of different youth populations, and some of the organizations dedicating time and energy to meet those needs, are generally eclipsed by more “pressing” and newsworthy events. Since we believe that young people are our most important natural resource, we hope that by honoring the work of an individual dedicated to serving youth we will focus attention on the enrichment of all youth.

**CRITERIA**

Any individual from a human service or voluntary organization who serves the needs of youth, either as a primary mission or as a component of a more general mission, is eligible for nomination.

We are particularly interested in those individuals from organizations which offer direct service as opposed to indirect service (such as funds or supplies). The individual will be chosen by the Board of the Auburn Kiwanis Club based on nominations from the community.

**NATURE OF THE AWARD**

The proposed award will be presented at the Auburn Kiwanis Dinner meeting in April at the Springside Inn in Auburn. Associated with the award will be a \$300 contribution to the not-for-profit organization or program of the winner’s choice.

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**KIWANIS ADULT SERVICE TO YOUTH AWARD**  
(Ages 19 & over)  
**NOMINATING FORM**

1. Name of individual completing the form \_\_\_\_\_  
Organization/group \_\_\_\_\_  
Relationship to candidate \_\_\_\_\_

11. Candidate's Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone number \_\_\_\_\_

111. Please describe briefly the nature of the candidate's service and why you feel she/he should be considered for the award (please refer to the award narrative for sample criteria).

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