

Virginia Association of Housing Counselors Conference  
**“The Housing Counselor”**

**Multi-talented; Multi-Faceted;  
The Wearer of Many Hats**

**2009 Nomination Guidelines**

- Individuals or organizations are encouraged to nominate their own project/activities, but may also nominate those of others.
- Nominations will be reviewed and winners selected by the VAHC Awards Committee.
- Nominations must be received by 5:00 pm on Friday, April 3, 2009.
- The Nomination Form must be typed or printed legibly. The nomination must clearly demonstrate the following:
  - ✓ The **Challenge** of the project/activity (How was the project/activity different or new than other projects/activities currently available)
  - ✓ The **Context** of the project/activity (Describe the situation)
  - ✓ The **Action** the individual/organization demonstrated to address the context (explain how the project/activity addressed the situation)
  - ✓ The **Result** of project/activity. (How was the recipient impacted by the result? Demonstrate in measurable examples. Additional information such as newspaper articles, resume, or letters of support may be included with the nomination. Additional information should be limited to no more than five items.)
- Nominations will be accepted via mail, email or fax.
- There will be one winner from each region.
- Winners will be presented the award at the annual VAHC conference held May 4-7, 2009.

**SUBMISSION:**

Nomination Forms must be received by 5:00 p.m. on ~~Friday, April 3, 2009.~~  
**(Deadline has been extended to Monday, April 13<sup>th</sup>)**

Submit Nominations to:

Shelita Adams, CEU Coordinator  
Loudoun County Department of Family Services  
102 Heritage Way NE  
Leesburg, VA 20176  
FAX: 571-258-3272  
shelita.adams@loudoun.gov

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1. Nominee Information:

Nominee Name: \_\_\_\_\_  
Title of Nominee (if applicable): \_\_\_\_\_  
Nominee's Agency/Company: \_\_\_\_\_  
Address of Nominee: \_\_\_\_\_  
Nominee's Telephone: \_\_\_\_\_  
Nominee's Email: \_\_\_\_\_

2. Describe how the Nominee met the criteria for the award. Additional pages or material may be attached if appropriate. Include any photos, brochures, etc.

Nomination Submitted By: \_\_\_\_\_  
Signature Date

Print Name & Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

Completed forms should be emailed or faxed by Friday April 3, 2009 to:  
Shelita Adams, CEU Coordinator  
Loudoun County Department of Family Services  
102 Heritage Way NE  
Leesburg, VA 20176  
[Shelita.adams@loudoun.gov](mailto:Shelita.adams@loudoun.gov)  
571-258-3272 (fax)