THE MATTHEW DALE OUTSTANDING VICTIM ADVOCATE
NOMINATION FORM
Attorney General's Award
Montana Crime Victim Rights Week – April 7 – 13, 2019

Name of Person Submitting Nomination: ________________________________

Affiliation/Organization: ____________________________________________

Address: __________________________________________________________

Telephone Number: _________________________________________________

Name of Nominee or Team: ____________________________________________

Please check the area that applies:

_____ Volunteer          _____ Citizen

_____ Paid Professional  _____ Other (Please specify)____________________

Affiliation/Organization: ____________________________________________

Address: __________________________________________________________

Nominee’s Supervisor or Agency/Program Director: _______________________

INSTRUCTIONS:
Please attach a brief summary (not to exceed 250 words, double-spaced) explaining why your nominee should be honored. A nominee may be one individual or a team. Please include:

• Nominee’s specific efforts that benefit crime victims;
• How long nominee has been involved in these efforts;
• Nominee’s relationship to your organization or other victim service programs in your community; and
• What makes the nominee’s efforts exemplary and beneficial to crime victims in your community or in the State of Montana?

Please attach at least three letters supporting your nomination from the various individuals and agencies with whom the nominee works.

Nominations for this year’s awards must be received no later than April 26 2019. Send, Email or fax nominations to:

Joan Eliel, Director
Office of Consumer Protection & Victim Services
P.O. Box 201410
Helena, MT 59620-1410
Phone: 406-444-1907        Fax: 406-442-2174
jeliel@mt.gov
Additional copies of this form are available at www.dojmt.gov/victims/forms