

OUTSTANDING VICTIM ADVOCATE NOMINATION FORM

Attorney General's Award

Montana Crime Victim Rights Week – April 10-16, 2016

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?

You are encouraged to attach 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 8, 2016**. Send, Email or fax nominations to:

Matthew Dale, Director
Office of Consumer Protection & Victim Services
P.O. Box 201410
Helena, MT 59620-1410
Phone: 406-444-1907 Fax: 406-442-2174
madale@mt.gov

Additional copies of this form are available at www.dojmt.gov/victims/forms