



Clara Barton Honor Award for Meritorious Volunteer Leadership

Eligibility:

The Clara Barton Honor Award for Meritorious Volunteer Leadership may be presented to a volunteer for service in a number of leadership positions held over a period of years and whose performance meets the criteria noted below. It may be presented at any level within the organization, and by any unit, including national headquarters. A volunteer may receive the award only once from an individual unit; however, they may receive the award from more than one unit.

Criteria:

The nominee for the Clara Barton Honor Award for Meritorious Volunteer Leadership award should have provided:

- Service in a number of leadership positions and personal expertise that has enabled the American Red Cross to contribute valuable service to the community.
- Leadership in identifying and assessing volunteer performance and organizational concerns. Cooperation with other volunteer and paid staff in developing and implementing effective solutions in a resourceful and productive manner.
- Constructive guidance to co-workers in the efficient performance of assignments.

Selection Requirements:

The Clara Barton Honor Award for Meritorious Volunteer Leadership is given at the local unit level, including national headquarters, to an American Red Cross volunteer who:

1. May be made by any American Red Cross volunteer or paid staff member.
2. Be a current American Red Cross volunteer with at least one year of continuous service.
3. May be considered from all levels of the local unit.

The Nomination Packet MUST include the completed application form and criteria statements prepared as follows:

- Printed **short, bulleted statements** to address the criteria in the order listed above.
- **No more than five** statements per criteria.
- Include nominee's name in top right-hand corner of any additional page.
- Attach criteria statements to application form.

The Nomination Review Process:

- **Chapters:** Nominations should be reviewed by the Chapter Chair and/or Chair of Volunteers; the final approval rests with the chapter chair.
- **Blood Services Regions:** Nominations should be reviewed by the Blood Services region chair and/or Chair of Volunteers; final approval rests with the Blood Services region chair.
- **Service to the Armed Forces Stations:** National stations should submit nominations to their respective region award committee.
- **National Headquarters Departments:** Reviews will be conducted by a cross functional sub-committee under the supervision of each department's management.

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Nomination Form

The Nominee

| | | |
|-----------|------------|--|
| | | |
| Last Name | First Name | |

Current Position with the American Red Cross

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

American Red Cross Unit

| | | | | |
|------|---------|------|----|-----|
| | | | | |
| Name | Address | City | ST | Zip |

The Nominator

| | | |
|-----------|----------------|------------------|
| | | |
| Last Name | First Name | |
| | | |
| Title | E-mail Address | Telephone Number |
| | | |
| Signature | Date | |

Reviewer(s) *(Place initials after title)*

| | | | |
|----------------|------------------|-------------------------------|-------------------|
| ___ Supervisor | ___ Unit Manager | ___ Chair/Chair of Volunteers | ___ Other (title) |
|----------------|------------------|-------------------------------|-------------------|

For Chapters or Services Blood Region

Approved By Unit Chair: *(Place initials after title)*

| | |
|-----------|------------|
| | |
| Last Name | First Name |
| | |
| Signature | Date |

Statement of Nomination *(please use additional sheet(s) as necessary)*

Provide short, bulleted statements to address how the nominee meets or exceeds the criteria for this nomination: