



Name (please print) \_\_\_\_\_ Phone (include area code) \_\_\_\_\_

Address \_\_\_\_\_

Occupation \_\_\_\_\_ Is nominee a PEP Volunteer? YES  NO

Email Address \_\_\_\_\_

Indicate Volunteer's Category (may be more than one):

PEP Air

Emergency Social Services

Road Rescue

Search & Rescue

Emergency Communications

Lifetime Achievement

Following are the names of two people or organizations who would be prepared to support the nomination:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

The following is a biographical sketch of the outstanding qualities of the nominee and my reasons for naming this nominee **(please feel free to add additional pages)**:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of Nominator (please print) \_\_\_\_\_ Phone \_\_\_\_\_

Address of Nominator \_\_\_\_\_

Signature of Nominator \_\_\_\_\_ Date \_\_\_\_\_

**To be completed by the authorized Volunteer Services Representative  
and EMBC Regional Manager ONLY.**

---

Comments of Volunteer Service Representative:

---

---

---

---

---

---

---

---

---

---

---

Comments of EMBC Regional Manager:

---

---

---

---

---

---

---

---

---

---

---

Signatures:

\_\_\_\_\_  
EMBC Regional Manager

\_\_\_\_\_  
Volunteer Services  
Representative

Date: \_\_\_\_\_

---