**Service Above Self Award**

NOMINATION FORM

Rotary’s highest honor recognizes Rotarians who demonstrate Rotary’s motto, ***Service Above Self***, by volunteering their time and talents to help others. The award is internationally competitive and is granted to no more than 150 Rotarians worldwide, and no more than one from each district, each year.

**Do not submit the paper form to Rotary International. Only nominations made through this form to the District Governor will be accepted for consideration.**

NOMINATOR

First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Membership ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rotary Club \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ELIGIBILITY: Please confirm the following are true: [ ] True

I am not nominating myself.

I am not nominating my spouse, child, grandchild, the spouse of a child or grandchild, parent or grandparent.

I am not nominating a current, incoming, or immediate past district governor; nor a current/incoming/past

 RI director; nor a current/incoming/past Rotary Foundation trustee; current/incoming/past RI President

Is the nominee an ACTIVE member in GOOD STANDING? o Yes o Unsure o No

Has the nominee previously been awarded the ***Service Above Self Award?*** o Yes o No

NOMINEE

**Any active Rotarian in good standing** may be nominated except present, incoming or immediate past governors; present, incoming or Past RI Directors; RI Presidents; and Foundation Trustees. It is not possible to nominate one’s self for the award. In addition, nominees must not be the spouse, lineal descendant (child or grandchild), a spouse of a lineal descendant, or an ancestor (parent or grandparent) of the nominator.

First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Membership ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Classification or former classification \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rotary Club of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of years of Rotary membership \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

District 5000

To be considered for the ***Service Above Self Award***, a Rotarian must have performed continuing humanitarian service in any form. This award is intended to recognize especially those who actively help others through Rotary. It is not awarded solely in recognition of one’s performance in an elected or appointed Rotary assignment, and financial contributions to The Rotary Foundation or specific projects will not be considered.

Personal biography

Please limit your description to one paragraph of approximately 500 characters.

Rotary positions held *(please list the most recent, up to 5)*

Position Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Rotary Year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Rotary Year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Rotary Year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Rotary Year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Rotary Year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rotary service activities

Non-Rotary service activities

Describe how this candidate embodies ***Service Above Self*** *(required)*

Signature of nominator \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Send this to grants@rotaryd5000.org by Oct 1