

2013 Senior Illinois



Director
John K. Holton

sponsored by



Nomination Form

The **Senior Illinois Hall of Fame**, exclusively for adults age 65 and older, is open to those who excel in one of four categories.

Eligibility is based on the nominee's past and present accomplishments. The candidate must be a current Illinois citizen or a former citizen who lived in Illinois the majority of his or her life. Posthumous nominees will also be considered. Illinois Department on Aging staff will thoroughly review all applications and ultimately submit no more than 44 finalists to the judges, who will select one individual in each of the four categories for induction into the **2013 Hall of Fame**.

Category (*check one*):

- | | |
|---|---|
| <input type="checkbox"/> Community Service | <input type="checkbox"/> Education |
| <input type="checkbox"/> Performance and/or Graphic Arts | <input type="checkbox"/> Labor Force |

Name of Nominee:

Address:

Phone:

Age:

**Nominations must be postmarked or faxed by
August 19, 2013, to be considered.**

Please review the entire application before completing the criteria.

The nominee must be age **65 or older** to be eligible for the Senior Illinois Hall of Fame. If more space is needed, please attach an 8½” x 11” sheet of paper and clearly mark the continuation. The nominator may also attach newspaper clippings, photographs or letters of recommendation to support the nomination (no more than eight total attachments, please). Items will **not** be returned unless a self-addressed, stamped envelope (with sufficient postage) is included in the nomination packet. If you have questions, call the Department on Aging’s Senior HelpLine at **1-800-252-8966, 1-888-206-1327 (TTY) or 1-217-785-3390.**

PLEASE PRINT OR TYPE.

- I. Thoroughly describe contributions the nominee has made in the specified category.**

2. Describe any voluntary contributions to society; at senior centers, retirement facilities, hospitals, schools, churches; working with specific organizations or clubs; or through independent charitable activities.

3. List programs or activities the nominee has implemented to improve the quality of life for others.

4. List previous public recognition honors earned by the nominee.

5. Other comments.

Nominator's Name:

Street Address:

City, State, Zip

Phone:

Mail to: Illinois Department on Aging
Division of Community Relations and Outreach
One Natural Resources Way, #100
Springfield, Illinois 62702-1271

Fax to: 1-217-785-4477

Contact: Cathy.Houghtby@illinois.gov
217-785-3390

The Illinois Department on Aging does not discriminate in admission to programs or treatment of employment in programs or activities in compliance with appropriate state and federal statutes. If you feel you have been discriminated against, you have a right to file a complaint with the Illinois Department on Aging. For information, call the Senior HelpLine at 1-800-252-8966 (Voice), 1-888-206-1327 (TTY).