

**NATIONAL EXTENSION ASSOCIATION OF FAMILY & CONSUMER SCIENCES**  
**NEW YORK AFFILIATE**  
**Special Service Award**

**Purpose:**

1. To recognize and encourage leadership in NEAFCS-NYA.
2. To spotlight the programming efforts and accomplishments of members.
3. Six (6) Awards may be given each year, with a preference to one award per district.

**Eligibility:**

1. This award is open to current, active NEAFCS members who have been members for less than 10 years.
2. Nominee must be a NEAFCS member as of Jan. 1 of the current calendar year.
3. This award can only be received once.

**Recognition:** A Certificate of Recognition will be presented at the appropriate time and place, as determined by the NEAFCS-NYA Awards & Recognition Committee.

**Application for Award**

1. NEAFCS member(s) may nominate self or another NEAFCS member.
4. Complete the application form and attach it to:
  - a. A 50-word summary to be used for publicity.
  - b. 2-3 page summary (typed, double-spaced) that explains concisely what the nominee has done to deserve this award. Select one program that shows techniques, target audience, evaluation, results, behavioral changes, accomplishments, and how they relate to the totals of the county organization and issue area.
  - c. Briefly highlight the total programs of the nominee (1 page).
  - d. Secure and attach two (2) support letters from any of the following: community organizations, CCE Association Director, CCE County Program Leader, Cornell Faculty, member of NEAFCS-NYA.
  - e. Up to five (5) pages of support materials may be included.
5. Send three (3) copies of these items to the Awards & Recognition Vice President by the NYA deadline.

**Judging Criteria: 100 Points** Application must score 90 points to be considered for recognition.

1. Evidence of leadership in NEAFCS-NYA (30 points).
2. Programming efforts that demonstrate results (50 points).
3. Demonstrated professional improvement (20 points).

**SPECIAL SERVICE AWARD  
NEAFCS-NYA APPLICATION FORM**

Nominee: \_\_\_\_\_

Present Position: \_\_\_\_\_ Date of Employment: \_\_\_\_\_

Job Responsibility by Percentage: \_\_\_\_\_

\_\_\_\_\_

Office Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ County: \_\_\_\_\_

NEAFCS-NYA District: \_\_\_\_\_

If selected as an NYA winner, please specify exact wording of name for award certificate:

\_\_\_\_\_

College or University Attended: \_\_\_\_\_

Major Area of Study: \_\_\_\_\_

Degree(s), Date: \_\_\_\_\_

Years of NEAFCS Membership: \_\_\_\_\_

Leadership Roles in NEAFCS/NEAFCS-NYA (include dates): \_\_\_\_\_

\_\_\_\_\_

List national/state NEAFCS meetings and conferences attended: \_\_\_\_\_

\_\_\_\_\_

List professional improvement activities in past 3 years (courses, in-service, conferences etc.):

\_\_\_\_\_

\_\_\_\_\_

Other professional organizations nominee belongs to/is active in: \_\_\_\_\_

\_\_\_\_\_

Support letters attached from (please give name and title):

1. \_\_\_\_\_
2. \_\_\_\_\_

Check National Initiative(s) that apply to this member's programming efforts:

- |   |   |
|---|---|
| <input type="checkbox"/> Food Safety and Quality                | <input type="checkbox"/> Revitalizing Rural America |
| <input type="checkbox"/> International Marketing                | <input type="checkbox"/> Sustainable Agriculture    |
| <input type="checkbox"/> Waste Management                       | <input type="checkbox"/> Water Quality              |
| <input type="checkbox"/> Youth at Risk/Plight of Young Children | <input type="checkbox"/> Other Base Program(s)      |
| <input type="checkbox"/> Decisions for Health                   |   |

Submitted by:

\_\_\_\_\_  
Nominee or Nominating NEAFCS Member

\_\_\_\_\_  
Date

I have reviewed this application and supplemental information and certify it to be true, and approve the application:

\_\_\_\_\_  
Immediate Supervisor of Nominee

\_\_\_\_\_  
Date