



Nomination Form

Please print and mail the completed form with the required criteria information to:

St. Vincent's HealthCare Foundation
 P.O. Box 41564
 Jacksonville, FL 32203

Nominations will be accepted January 1, 2017 - February 18, 2017

If you are chosen as a finalist you will be contacted the week of February 22, 2017 and will be asked to come to St. Vincent's Foundation on ***March 4 & 5, 2017*** for the interview.

▪ **Candidate Information:**

Candidate Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Cell phone: _____

Email: _____

School: _____ Spring Break Dates: (if known) _____

▪ **Extracurricular Activities:**

(i.e. Academic Societies, Sports, Dance, Music, Art, Youth Groups, etc.)

Please attach a resume (1-2 pages only) including all extracurricular activities, offices held, etc.

▪ **The candidate must answer the following question:**

How has your faith influenced your activities in the category for which you are nominated.
 Please keep your answer to less than **250 words** (please type on a separate sheet).

▪ **Nominator Information:**

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Relationship to the nominee: _____

Please tell us how you learned about *The Mary Awards*? _____

▪ **Criteria For Nomination: (To be answered by the Nominator)**

We recognize that this nominee may possess qualities and skills that relate to more than one of the categories listed for nomination. Please choose the **ONE** that best represents her.

- Please indicate the category for which this candidate is nominated: (*please mark 1 only*)

Academics Athletics Leadership Philanthropy/Volunteerism

- What circumstances make this candidate eligible for *The Mary Awards*

Please keep your answer to **less than 200 words (please type on a separate sheet)**

▪ **Endorser Information:**

Endorser (must be one of the candidate's faith leaders – priest, deacon, pastor, rabbi, imam, youth minister, etc.). Please attach letter of endorsement from your faith leader.

Name: _____

Place of Worship: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Information For Your Records

- Incomplete applications will not be accepted. Please note the criteria requirements for nomination on page 2. Please attach a resume which includes all extracurricular activities, offices held, etc.
 - Nominations must be received no later than the February 18, 2017 deadline and mailed to:
St. Vincent's HealthCare Foundation
P.O. Box 41564
Jacksonville, FL 32203
 - If you are chosen as a finalist you will be contacted the week of February 22, 2017 and will be asked to come to the St. Vincent's Foundation office at 1 Shircliff Way, Jacksonville, FL 32204 on **March 4 and/or 5, 2017 for the interview.**
 - Finalists will be honored and four (4) winners will be announced at a dinner to be held on April 20, 2017 at San Jose Country Club, 7529 San Jose Blvd., Jacksonville, FL 32217
 - Each winner will receive a \$1,000 cash gift from St. Vincent's HealthCare. If for any reason the winner cannot accept the gift, it may be directed to a charity or faith community of the winner's choice.
- Each finalist will receive up to five (5) complimentary tickets to the awards banquet
 - Tables of 10 may be purchased for \$1,000. Individual tickets \$45 each
 - For sponsorship information contact St. Vincent's Foundation at 904-308-7306
 - A committee of representatives and members appointed by St. Vincent's HealthCare will serve as the confidential selection committee. Their decision is final.
- Emceed by Mary Baer, News Anchor, WJXT Channel 4
 - Please **do not send** school transcripts with your nomination.