



OUTSTANDING SENIOR CITIZEN OF CARVER COUNTY

Sponsored by Carver County Fair

2025 Award Nomination

Check one: ___ **MALE** Nominee or ___ **FEMALE** Nominee

To nominate an individual, please list what nominee (age 70 or over by June 1) does for others in your community or organization after reaching the age of 65. Feel free to discuss your nomination with this person and collect needed volunteer activity information. Please use a separate page.

Submit this form and information to Carver County Fair (gm@carvercountyfair.com)

One male and one female winner will be selected. They will be recognized for their service at the Carver County Fair at the award ceremony on Thursday of the fair.

Nominee Name:	Date of Birth:	Nominated by:
Address:		Address:
Home Phone: _____ Mobile Phone: _____ E-mail: _____ _____		Home Phone: _____ Mobile Phone: _____ E-mail: _____ _____

How do you know the nominee? _____

What was the nominee's occupation before age 65? _____

Signature: _____ Date: _____

Complete this form and supporting information and mail to: Carver County Fair, 501 West 3rd St, Waconia MN 55387 or e-mail to: gm@carvercountyfair.com. Any questions please contact Diane Polzin at 952-442-2333 or gm@carvercountyfair.com. **Deadline for submission July 7, 2025.**

Name of Nominee _____

Volunteer Activities

List of the volunteer activities and benefits to the community/organization:

Volunteer activity/Organization: _____

Activity or Responsibility: _____

Time commitment: _____

Benefit to the community: _____

Volunteer activity/Organization: _____

Activity or Responsibility: _____

Time commitment: _____

Benefit to the community: _____

Volunteer activity/Organization: _____

Activity or Responsibility: _____

Time commitment: _____

Benefit to the community: _____

Volunteer activity/Organization: _____

Activity or Responsibility: _____

Time commitment: _____

Benefit to the community: _____

Name of Nominee _____

Volunteer activity/Organization: _____

Activity or Responsibility: _____

Time commitment: _____

Benefit to the community: _____

Community Memberships

Tell us about community organizations or committees they belong to. Be sure to list any positions or offices held by the nominee within these organizations.

Organization	Responsibilities	Time Spent
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
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_____	_____	_____

Service Awards

List outstanding accomplishments, awards or honors they have received *after reaching age 65*.

Award	Year Received
_____	_____
_____	_____
_____	_____
_____	_____

What does this nominee do that makes them stand out as an “outstanding” senior volunteer? Use specific examples.

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Page 4

