YOLO DISTRICT AWARDS NOMINATION FORM VENTURING ADVISOR OF THE YEAR

Name of Nominee_			Unit
Tenure in position:	Start Date	End Date	Duration
What training has the	ne nominee received?		
What training has the	ne nominee given to o	others?	
Other community a	ctivities in which non	ninee participates, particularl	y service to youth:
you like to see this p	person recognized? Wh	at have been the nominee's gr	sures of the unit's strength. Why woul eatest contributions to your unit? Giveing Venture Leader of the Year?
Nominator Information	<u>tion</u>		
Name:		Unit Position:	
		Email:	
I certify that the infor	rmation provided in this	s nomination application is acc	urate to the best of my knowledge and District Venture Leader of the Year.
Signature:		Date:	