

**26<sup>TH</sup> ANNUAL SHARED LIVING / ADULT FAMILY CARE  
COMMUNITY LIVING RECOGNITION AWARD**

**CELEBRATING 26 YEARS OF  
INSPIRATION & INNOVATION  
2019**

**Nomination**

Name of Nominees:

Nomination Submitted By:

Home/Work Address:

Agency

Home/Work Telephone #: H: or C:

Director Approving Nomination:

**On the reverse side of this form, or in a phone call or e-mail, please submit  
examples of exemplary performance describing your nominees for the:  
26<sup>th</sup> Annual Shared Living /Adult Family Care Community Living Recognition Award**

**Nominees must meet one or more of the following criteria:**

- ❖ Nominees work cooperatively and effectively with agencies and other service providers
- ❖ Nominees are active and/or contributing members of their community, due to strong community integration/networking efforts
- ❖ Nominees have achieved significant positive growth and change through their relationship
- ❖ Nominees have demonstrated mutual personal commitment to each other
- ❖ Nominees have demonstrated ability to think outside the box and creative problem solving to enhance quality of life
- ❖ Nominees have worked through a significant medical or other issue(s) while continuing to provide a warm, loving home (may include end of life care)
- ❖ Nominees demonstrate strong family inclusion

**Contacts for Nominations:**

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