## Fort Bliss Volunteer of the Quarter Nomination Form

| Nominator    |                       |                     |   |
|--------------|-----------------------|---------------------|---|
| Organization |                       |                     |   |
| Address      |                       |                     |   |
| Phone Number |                       |                     |   |
| E-mail       |                       |                     |   |
| Nominee      |                       |                     |   |
| Address      |                       |                     |   |
| Phone Number |                       |                     |   |
| F-Mail       |                       |                     |   |
| L IVIAII     |                       |                     |   |
|              |                       |                     |   |
|              | Why should your no    | minee be one of the |   |
|              | Fort Bliss Voluntee   |                     |   |
|              | (Please describe in   |                     |   |
|              | (i lease describe iii | 100 to 100 words)   |   |
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Submit nominations to the Fort Bliss Army Volunteer Corps office at Bldg. 2494 Ricker Road, fortblissvolunteer@yahoo.com, or fax (915) 568-8252.

Volunteers must have at least 25 hours in VMIS

| Nomination Period | Nomination Due NLT           | Recognition Date |
|-------------------|------------------------------|------------------|
| October-December  | COB Last Friday of December  | January          |
| January-March     | COB Last Friday of March     | April            |
| April-June        | COB Last Friday of June      | July             |
| July-September    | COB Last Friday of September | October          |