Helen C. "Holly" Riddle Distinguished Service Award



2020 Nomination Application

Section 1 Nomination Form

The Helen C. "Holly" Riddle Distinguished Service Award is presented to an outstanding North Carolina professional whose work has improved the quality of life for people with intellectual and other developmental disabilities. The award will be presented at the annual meeting of the NC Council on Developmental Disabilities on November 4, 2020 in Cary, NC, beginning at 5:30 p.m.

Section 1. Nonlination (offi		
Name of nominee		
Name (as you wish it to appear on th	e award)	
Home address		
City	State	Zip
Phone number	Email	
Section 2. Listing of Qualifications		
of the nominee for this award. Give s	t a brief description (maximum 300 word pecific information about the nominee's nd other developmental disabilities, inclu hip. Please include the following:	activities in improving
characteristicsAreas of strength, leadership and disabilities	ence, contributions and other distinguish	dother developmental
 List nominee's distinguishing pers area of intellectual and other deve 	onal characteristics, advocacy work and elopmental disabilities	other activities in the
Section 3. Supporting Information		
Identify three individuals who have k	nowledge of the efforts of the nominee.	
nominee. Statements should include spe	submit a short statement (maximum 300 work ecific examples of work the nominee has dorectual and other developmental disabilities.	
1. Name		
Home address		
City	State	Zip
Phone number	Email	

2. Name			
Home address			
City			Zip
Phone number			·
3. Name			
Home address			
City		State	Zip
Phone number	Email		
Section 3. Supporting Information			
Identify three individuals who have k	nowledge of the efforts o	of the nominee.	
NOTE: It is encouraged that individuals a nominee. Statements should include spe change in the lives of people with intelle	ecific examples of work the	nominee has do	• •
1. Name			
Phone number			
Email			
2. Name			
Phone number			
Email			
3. Name			
Phone number			
Email			
Nomination submitted by:			
Full name			
Organization (if applicable)			
Title/relationship to nominee			
Home address			
City		State	Zip
Phone number			
Email			North Carolina Council on Developmental Disabilities

I've read and followed the submission guidelines for my application to be considered for the 2020 Advocacy and Leadership Awards. I understand my application will not be considered if the following documents are not completed:

Section 1: Completed
Section 2: Completed with 'Listing of Qualifications' (required) attached.
Section 3: Completed with 'Short Statements of Support' (optional) attached.
Section 4: Completed (required)
Submitted ON OR PRIOR TO, Friday, July 31, 2020.

Submission Options: NOTE: all pages of this application must be submitted by Friday, July 31, 2020 in one of the three ways:

- Option ONE: Email the application form to David Ingram, Systems Change Manager, at david.ingram@dhhs.nc.gov and info@nccdd.org
- **Option TWO:** Fax the completed application to 919-715-0325. Please include cover sheet indicating Full Name and total number of pages.
- Option THREE: Mail the application to:

North Carolina Council on Developmental Disabilities ATTN: NCCDD Advocacy and Leadership Awards 2010 Mail Service Center, Raleigh, NC 27699-2010

