

**The Mark Dreiling Community Leadership Award
2022 Nomination Form**

Nominator Name: _____

Nominator Email:

Nominee Name: _____

Nominee Email: _____

Nominee Phone Number: _____

- 1. How long and in what way(s) is the nominee involved in HIV/AIDS volunteer work?**

- 2. How has the nominee demonstrated exceptional volunteer leadership?**

- 3. What significant impact has the nominee had on the fight against HIV/AIDS?**

- 4. What lasting has the nominee made to local HIV/AIDS organizations and/or events?**

- 5. Any additional information we should know about this nominee?**