THE ROTARY FOUNDATION
OF ROTARY INTERNATIONAL

POLIOPPLUS PIONEER AWARD

Criteria and Guidelines

Purpose: The award is made to honor Rotarians who provided extraordinary service to The Rotary Foundation, such service having a substantial impact on the ultimate goal of polio eradication.

Eligibility: Rotarians who performed exceptionally meritorious service to the ultimate cause of polio eradication prior to 1 November 1992.

Criteria:

1. The service must be non-financial, although service in advocacy and fund raising is not excluded.

2. A Rotarian may receive the Pioneer award and one or both of the Service Awards for a Polio-free World.

3. Directors, Trustees and members of the International PolioPlus Committee are ineligible for the award while serving in such positions.

Nominations: Nominations may be made by any Rotarian to the General Secretary. The General Secretary will forward all nominations to the chair of the PolioPlus Pioneer Award Selection Committee with information of any prior PolioPlus Service Awards received. The Selection Committee shall meet electronically or by phone, except when authorized by the Trustee Chair.

Selection Committee: Members shall be appointed by and serve at the pleasure of the Trustee Chair.
THE ROTARY FOUNDATION OF ROTARY INTERNATIONAL

POLIOPLUS PIONEER AWARD

Nomination Form
*Deadline: 1 October 2018

Please submit this form to the PolioPlus program by email to polioplus@rotary.org.

PIONEER AWARD NOMINEE Information: (please write clearly or type information)

Name ____________________________________________________________
Surname                First                Middle

Address __________________________________________________________

Country __________________________ Rotary Club ___________________ District __________

Email Address (if known) ____________________________________________

PROPOSER Information: (please write clearly or type information)

Name ____________________________________________________________
Surname                First                Middle

Address __________________________________________________________

Country __________________________ Rotary Club ___________________ District __________

Email Address ____________________________________________________

What is the proposer’s relation to the nominee? (District Governor to district or club committee member, Chairman of National Committee to member of national committee, etc.)

____________________________________________________________________

ONLY SERVICE PRIOR 1 NOVEMBER 1992 CAN BE CONSIDERED

Service:
Explain in detail what the nominee has done which merits recognition as being an active, personal, non-financial contributor to the eradication of polio; why it has been outstanding; when it was performed (please write clearly or type information; please provide a minimum of 400 typed words for the nomination).

Signed

Date