

That's what I'm talking about



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February 2, 2014

Dear Rhode Island Residents,

Hamilton Relay, the contracted service provider of Rhode Island is seeking your assistance in identifying candidates for the Hamilton Relay 2014 Better Hearing and Speech Month Recognition Award. We are looking for individuals who are hard of hearing, late deafened or have difficulty speaking and who have been positive influences in Rhode Island, demonstrating commitment to advocacy, leadership and enhancing the lives of those around them. The award will be presented during Better Hearing and Speech Month in May.

Hamilton Relay Better Hearing and Speech Award Recipients from previous years include:  
Christine Thompson - 2012 Better Hearing and Speech Month Recognition Award Recipient  
James Litvack - 2011 Better Hearing and Speech Month Recognition Award Recipient

Is there someone you wish to nominate for 2014?

A questionnaire is attached to assist in providing information about your candidate, including a brief description about the individual and what this person has done that causes you to nominate him/her. Please send your nominations directly to me by **March 19<sup>th</sup>** via e-mail, fax or by mail. My contact information is included under my signature below.

Celebrating community leaders during Better Hearing and Speech Month is something we look forward to each year. Thank you in advance for your participation in nominating deserving individuals from your community. We are eager to learn more about the community leaders in Rhode Island.

Sincerely,

Courtenay Petracca

Rhode Island Outreach Coordinator

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### Hamilton Relay 2014 Better Hearing and Speech Month Recognition Award

Due March 19<sup>th</sup>, 2014 • PLEASE PRINT CLEARLY

Name of Candidate: \_\_\_\_\_

(Please note that this award is presented to one individual within your state each year who is hard of hearing, late deafened, or has difficulty speaking. At this time, organizations, schools, associations and other groups are not eligible for this award.)

Candidate's Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Please circle: Voice TTY CapTel VP Other \_\_\_\_\_

Email/Pager addresses: \_\_\_\_\_

The candidate:  is hard of hearing  is late deafened  has difficulty speaking

How has the candidate been active and/or made an impact in his/her community? (Please be sure to include information pertaining to the work he/she has done outside of his/her career and/or regular job duties.)

List the complete names of associations, organizations, clubs or other activities in which your candidate has been involved. Include position(s) held whether on a voluntary or paid basis, term length and any other pertinent details.

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## Candidate Nomination Questionnaire

What are the strongest points about the candidate?

Please list two references (other than yourself) and their contact information:

*(Please feel free to include additional information and/or attach additional pages as needed.)*