**Inspirational Athlete Award**

**2020 Nomination Form**

Nomination forms must be postmarked or faxed to the SOMI state office no later than **March 16, 2019**. Please answer every question. Some questions are for information in writing a press release for media distribution.

Area: Nominee Name:

Nominee Address: City: MI Zip:

Nominee or nominee family contact information:

Telephone: Email Address:

If this athlete is not chosen for the award, would you like a letter sent congratulating him or her on being nominated? \_\_\_\_ Yes \_\_\_\_ No

Number of years the athlete has been involved with Special Olympics:

What sports do they compete in?

What is the athlete’s date of birth?

Do they attend school or college? If so, which one?

Are they involved on any committees or groups? If yes, name them:

How does the athlete spread the word about the Special Olympics Movement?

Is the athlete employed? If yes, where and for how long?

How has involvement with SOMI changed their life?

Describe how the nominee best exemplifies the motto, “Let me win. But if I cannot win, let me be brave in the attempt.”

* Provide an example or examples of the nominee’s strong desire to do his or her best.
* How does the nominee display good sportsmanship and appreciation for fellow athletes?
* Describe how the nominee encourages others to compete toward their greatest abilities.
* Provide an example of the nominee exhibiting a positive attitude toward Special Olympics training and competition.

Is there any other information you feel the committee members should consider?

Will Athlete be participating in summer sports training?

Will Athlete participate in Area Summer Games?

Area Director’s Signature: Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Special Olympics Michigan**

**Inspirational Athlete Award**

**I. Purpose**

The Inspirational Athlete Award is an annual award presented at both the area and state levels. Area Directors may determine the appropriate procedure and time for naming and recognizing their area’s Inspirational Athlete.

**II. Criteria**

The criteria for selecting the Inspirational Athlete consists of the following items:

* The athlete should exemplify the motto, “Let me win. But if I cannot win, let me be brave in the attempt.”
* The athlete should show a strong desire to do his or her best.
* The athlete should display good sportsmanship and appreciation for fellow athletes.
* The athlete should encourage others to compete toward their greatest abilities.
* The athlete should exhibit a positive attitude toward Special Olympics training and competition.

**III. Method of Nomination**

Each area may submit one name for the Inspirational Athlete to the state office using the attached nomination form. Nominations must be postmarked, faxed or emailed to the state office no later than Monday, **March 16, 2020.** (Email to somi@somi.org or Fax to (989) 774-3034). A selection committee made up of the SOMI Emerging Leaders Advisory Council (ELAC) will review all nominations and select the SOMI Inspirational Athlete.

**IV. Award Presentation**

The award presentation will take place during the State Summer Games Closing Ceremony on **May 29, 2020.**