**Special Olympics Michigan**

**Outstanding Coach Award**

**I. Purpose**

Special Olympics Michigan recognizes the tremendous amount of time and personal effort that volunteer coaches give to our athletes. To thank them and to make the public more aware of the role that coaches play in our program, one coach from each of the 36 area programs is honored.

**II. Method of Nomination**

Each Area Director submits a name for the area’s Outstanding Coach along with supporting nomination material, to the Special Olympics Michigan state office. The nomination must be postmarked or faxed no later than **March 16, 2020.** Only one name may be nominated from each area. Please email to [somi@somi.org](mailto:somi@somi.org) or fax to 989-774-3034.

All Area Outstanding Coaches are invited, along with a guest, to attend the Outstanding Volunteer and Coaches Banquet held on **Wednesday, May 27, 2020** in Mount Pleasant, Michigan. Area directors and guests are also invited. At the banquet, all outstanding area coaches and volunteers are recognized.

**III. Criteria**

The following criteria may be used when naming the Area Coach of the Year:

1. Years of coaching Special Olympics.

2. Number of sports coached.

3. Number of sports in which coach is certified.

4. Number of athletes coached in a typical year.

5. Other ways the coach is involved (parent/family activities, fund-raising, leadership, etc.)

Nominations must show that the nominee has made a demonstrated and positive impact on the Special Olympics training and competition program in his/her area and on the Special Olympics athletes he/she coaches.

**Outstanding Coach Award**

**Nomination Form**

Nomination forms must be postmarked or faxed to the Special Olympics Michigan state office no later than **March 16, 2020**. Please email to [somi@somi.org](mailto:somi@somi.org) or fax to 989-774-3034.

Area Area Director

Area Outstanding Coach

Address

City Zip Code

Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone (cell) (home)

Number of years as a Special Olympics Coach

List the sports this person coaches

List the sports in which this person is certified

Approximately how many athletes does this person coach in a typical year?

What do you think makes this person an outstanding Special Olympics coach?

We encourage you to attach additional sheets of paper to tell your story, if necessary.

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Please describe coach’s involvement with Special Olympics in addition to coaching

(i.e., management team, fund raising, chaperoning, etc.). We encourage you to attach

additional sheets of paper to tell your story, if necessary.

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Please describe the coach’s relationship with the athletes on his or her team(s).

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Is the coach a family member of a Special Olympics athlete? Yes No

Is work with Special Olympics part of the coach’s full-time job?

If so, in what way?

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Please describe a memorable moment about this coach that has stuck out in your mind?

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What makes the coach you have nominated different from other coaches?

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

***If possible, please also include a letter from another individual from your area in support of your choice for “Outstanding Coach.”***