



# Lee County Homeless Coalition

*To advocate, educate, and promote awareness of issues and obstacles facing homeless individuals in Lee County through community collaboration, planning, and implementing solutions.*

## DEAN BLIETZ ANNUAL MEMORIAL AWARD FOR OUTSTANDING COMMUNITY SERVICE

### Board of Directors

**Chair:**  
William H. Rodriguez  
Florida Rural Legal Services

**Vice Chair:**  
Sharon Weiss-Kapp  
Advocate

**Treasurer:**  
Dale Korzec  
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**Secretary:**  
Michelle Smith  
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Amy Davies  
CDM Smith

Gwendolyn Howard-Powell  
Gwendolyn's Cafe

Carol A. Robinson LMHC  
The Phoenix Center  
for Personal Development

Neil Volz  
St. Matthew's House  
Next Level Church

Nominations must be received by 5:00 p.m. on September 30, 2016. The winner is chosen by value of contribution not the number of nominations. All submissions must be submitted on this form and the form must be completed in full. E-mail, or mail no later than September 30 to:

Lee County Homeless Coalition  
Janet Bartos, Executive Director  
1500 Colonial Blvd., Suite 235  
Fort Myers, FL 33907  
(239)322-6600  
E-mail: [Leehomeless@gmail.com](mailto:Leehomeless@gmail.com) or [Janet@leehomeless.org](mailto:Janet@leehomeless.org)

**Submission Guidelines:** Organizational entities or individuals may nominate more than one prospective candidate. No self-nominations are acceptable. A submission form must be completed in full in order for the nomination to be considered. The question "Explain why this person is being nominated" must include the reason the candidate is nominated, length of service in the field, and description of the person's impact on individuals they assisted. Letters of reference from individuals qualified to evaluate the candidate's suitability for the award should be provided. The winner is chosen by value of contribution not the number of nominations. Please attach responses to the below questions on a separate page.

Date: \_\_\_\_\_  
Name of Individual being nominated: \_\_\_\_\_  
Nominee's mailing address: \_\_\_\_\_  
Nominee's phone number: \_\_\_\_\_  
List of Nominee's affiliations and/or organizations where they volunteer: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Explain why this person is being nominated (limit to 300 words): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of person/agency submitting the nomination: \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact person: \_\_\_\_\_  
Phone: \_\_\_\_\_



Compassion... Commitment... Community

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