

PLEASE SUBMIT TO:
Vincentian Charitable Foundation
8250 Babcock Blvd.
Pittsburgh, PA 15237
or info@vcfgives.org



A Vincentian Society member who has opened the hearts of others to the Vincentian mission.

NOMINEE NAME _____

ADDRESS _____

EMAIL _____ PHONE NUMBER _____

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An awardee whose generosity to the Vincentian community fosters a spirit of service, sustains a mission of compassionate care, and makes the best of life possible for others.

NOMINEE NAME _____

ADDRESS _____

EMAIL _____ PHONE NUMBER _____

Please describe how your nominee has met award requirements in 2020 (attach additional sheet if necessary):

The Heart of Pittsburgh Award

An individual or organization who demonstrates the Vincentian values of spirituality, compassion, dignity, quality, stewardship, advocacy, collaboration, and innovation – throughout their work and influence in the Pittsburgh community.

Requirements: A community influencer whose commitment to “Pittsburghers helping Pittsburghers” is also reflected in time and service to Vincentian.

NOMINEE NAME _____

ADDRESS _____

EMAIL _____ PHONE NUMBER _____

Please describe how your nominee has met award requirements in 2020 (attach additional sheet if necessary):

The Heart of Gold Award

Awarded to a person or organization dedicated to true philanthropy (the love of humanity), whose commitment and work have made a sustained and significant contribution on the lives of those served by Vincentian.

Requirements: An awardee who has made the greatest impact to the organization over the course of five or more years.

NOMINEE NAME _____

ADDRESS _____

EMAIL _____ PHONE NUMBER _____

Please describe how your nominee has met award requirements in 2020 (attach additional sheet if necessary):

The Heart of Caregiving Award

NEW THIS YEAR! Awarded to a person or group who has/have demonstrated a commitment to the health and happiness of those adults or children served by Vincentian – going above and beyond expectations or exceeding their regular staff or volunteer duties with no additional compensation – for an extended period of time.

Requirements: An awardee whose efforts have made a difference in the lives of people served by Vincentian. Two nominations are required.

NOMINEE NAME _____

ADDRESS _____

EMAIL _____ PHONE NUMBER _____

Please describe how your nominee has met award requirements in 2020 (attach additional sheet if necessary):

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NAME OF NOMINATOR: _____

ADDRESS _____

EMAIL _____ PHONE NUMBER _____

(Nominators cannot nominate the same individual / organization for all four categories, self-nominate, or nominate a person from their family or household.)