



Massachusetts Council
for Adult Foster Care

LEADERSHIP • KNOWLEDGE • ADVOCACY

24TH ANNUAL SHARED LIVING / ADULT FAMILY CARE
COMMUNITY LIVING RECOGNITION AWARD

PEOPLE, REAL LIVES, REAL HOMES
SEPTEMBER 26, 2017

Nomination

Name of Nominees: _____
(Caregiver and Member names)

Nomination Submitted By: _____

Home/Work Address: _____

Agency _____

Home/Work Telephone #: _____

AFC Director Approving Nomination: _____

**24th Annual Shared Living /Adult Family Care Community Living Recognition Award
Meets one or more of the following criteria:**

- The nominees work cooperatively and effectively with agency and other service providers
- The nominees have brought about positive use of community integration and networking efforts
- The nominees have achieved significant positive growth and change
- The nominees have demonstrated there is a personal commitment to each other
- The nominees are able to think outside the box with creative problem solving.
- The nominees have worked through a significant medical issue(s) and continued to provide a warm loving home environment. This can include end of life stages.
- The nominees show they have strong family inclusion.
- The nominees cannot have any current disciplinary action pending.*
- The nominees should be living together at least two years (discretionary)*

Please submit examples of exemplary performance describing your nominee for the award:



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Please submit nomination by August 15, 2017
Selected nominations will be notified by August 31, 2017. Awards will be presented at the
Shared Living/ AFC Conference on 9/26/2017. Thank you for your submission!

PLEASE SEND YOUR NOMINATION FORM TO:

BGRIFFITH@ADULTFOSTERCARENS.COM

OR

FAX: 978-281-2223