



Louisiana
FOUNDATION

2019 Angel Award Nomination Questions

Your Contact Information

1) Please enter contact information for yourself:

First Name*: _____

Last Name*: _____

Title: _____

Company Name: _____

Street Address*: _____

Apt/Suite/Office: _____

City*: _____

State*: _____

Zip*: _____

Email Address*: _____

Phone Number*: _____

Mobile Phone: _____

How do you know the person you're nominating?*: _____

Nominee Contact Information

2) Please enter contact information for the person you're nominating:

First Name*: _____

Last Name*: _____

Title: _____

Company Name: _____

Street Address*: _____

Apt/Suite/Office: _____

City*: _____

State*: _____

Zip*: _____

Email Address*: _____

Phone Number*: _____

Mobile Phone: _____

3) Is the person you're nominating an employee of Blue Cross and Blue Shield of Louisiana? (BCBSLA Employees are eligible for the Blue Angel award, which is judged separately.)*

Yes

No

About the Nominee

4) Summary: Briefly describe the person you're nominating and their work.*

5) Geographical Region: Which of these best describes the part of Louisiana in which the person you're nominating works?*

Shreveport Region

Monroe Region

Alexandria Region

Lafayette Region

- Lake Charles Region
- Baton Rouge Region
- Houma Region
- New Orleans Region

6) Need: What need does the person you're nominating meet for Louisiana's children? How is the significance of the need measured?*

7) Commitment: How has the person you're nominating demonstrated grit and determination in sticking with their cause to make a difference? How have they gone above and beyond?*

8) Problem Solving: How does the person you're nominating demonstrate savvy leadership by using best practices or creating new approaches for solving problems for kids?*

9) Hands-on: The Angel Award recognizes people who have a direct impact on children. How has the person you're nominated demonstrated a hands-on involvement in bettering the lives of kids?*

10) Results and Impact: Describe the concrete results this person has created for Louisiana's children.*

11) Collaboration: How does the person you're nominating work with others to expand the size of their impact?*

12) Additional Information: If you want to share more information or supporting materials for your nominating, you may do so by uploading it here.

Nominee's Nonprofit

If selected for the Angel Award, we will make a grant to the nonprofit/charity that he or she represents. Please provide as much information as you can about your nominee's cause.

13) Nonprofit Contact Information

Nonprofit's Name (as registered with the Internal Revenue Service)*:

City*: _____

State*: _____

Phone Number*: _____

Website Address: _____

Email Address: _____

What is the nonprofit's mission statement?
