## LILY OF THE VALLEY AWARD

**DEADLINE:** 

March 1, 2024

 ${\it CONTACT}$ : Lindsey Spahr, Lily of the Valley Chair

15813 Cary Street, Omaha, NE 68136

lindseyspahr@gmail.com. | 402.450.8978

#### LILY OF THE VALLEY NOMINATION COVER LETTER

Congratulations on having a Member who has worked hard to qualify for the Lily of the Valley Award!

This year the cost of the medallion is \$52.00 engraved. Please have the Bethel write the check to the Nebraska Grand Guardian Council and send along with the form stating the exact name to be engraved. If someone else is paying for the medallion, they can pay the Bethel and then the Bethel write the check to GGC. If the nominee does not get the award, the check will be returned to the Bethel.

Thank you for taking the time to do this for your member. Remember the Member will need to be involved in filling out the forms. Few Councils will have all the information needed without the help of the nominee. Members are also welcome to come to a Council and asked to look at the requirements so they know if they are eligible.

Any Member who meets all the requirements, fills out the forms and sends them in on time will receive the Lily of the Valley Award. I will notify the Bethel Guardian by April 1 so the nominee can make arrangements to be at Grand Session in Kearney to get her medallion. It is an honor to get this award and each Member who receives it has worked hard for Job's Daughters.

If you have any questions for the Grand Year of 2023-2024 please contact Lindsey Spahr.

In Jobie Love and Spirit,

### **Lily of the Valley Committee**

Lindsey Spahr, 2023-24 Chair 15813 Cary Street, Omaha, NE 68136 402.450.8978 | lindseyspahr@gmail.com

Sally Comer 706 Golden Gate Cir Apt 7, Papillion, NE 68046 402.540.0844 | sacomer89@gmail.com

Elizabeth Grazier, PGG 9919 Emiline Street, La Vista, NE 68128 402.689.5784 | elizabeth.grazier@gmail.com

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## LILY OF THE VALLEY AWARD APPLICATION CHECKLIST

Application Submitted By	<del>.</del>	Date:	
Name of Applicant		Bethel No	
Address:			
Date of Birth:	CITY Aga as of March	STATE 1:	ZIP
	Age as of Waren		
☐ Daughter's involvement with the Bethel spanned 3 years bet			
<ul> <li>Daughter attended a minimum of fourteen (14) Bethel meet high school</li> </ul>	tings per school yea	r, (July-June) while	attending
☐ Daughter attended a minimum of seven (7) Bethel meetings	and/or activities pe	er school year, (July	/-June) after
high school graduation	la di servada de servada	145 DO	
☐ Daughter attended a minimum of three (3) Grand Sessions b	_		
□ Daughter attended a minimum of two (2) State Workshops b			- to take
☐ Daughter attended at least on eaddition al(1) statewide activ			
Application form has been completed and signed by the Bethel Guardian(s) where Daughter attended meetings and/or activities			
☐ Daughter has been recommended in writing by an Executive Member of the Bethel Guardian Council who is knowledgeable of the member's Job's Daughters activities			
Daughter has been recommended in writing by three (3) adults (who are not relatives of the Daughter), one of whom may be a current member of Job's Daughters, who are knowledgeable of the nominated Daughter's qualifications to receive this Award.			
A Bethel check for the amount of \$52.00 made payable to the Grand Guardian Council is enclosed for the purchase of the Lily of the Valley Award medallion			orthe
☐ This application is being sent to the current Lily of the Valley C	Chair by the deadline	of March 1	
If the Committee has questions regarding	g this nomination	please contact:	
Name			
Phone			
Address			
Email			

# LILY OF THE VALLEY AWARD APPLICATION FORM

Name of Applicant			Bethel No	
Address:	STREET	слтү	STATE	ZIP
Date of Birth:		Age as of Mar	ch 1:	
Bethel offices held bet	ween the ages of 16-20:			
Grand, State, Supreme	• or other International office	s held between the ag	es of 16-20:	

#### ATTENDANCE AT BETHEL MEETINGS

Daughter must have attended at least 14 meetings per calendar year (January to December) while in high school and 7 meetings per calendar year after graduation. Please note: Councils may have to work together on this portion to verify dates of attendance. Bethel Guardian(s) should initial each line after verifying information.

Bethel No.	Location	Term (Spring/Fall)	Year	Number of Meetings Attended	Check if after HS Graduation	BG Initials
						-
					-	

#### ATTENDANCE AT GRAND SESSIONS

Daughter must have attended at least 3 Grand Sessions between the ages of 16-20.

Date	Grand Session	BG Initials

#### ATTENDANCE AT STATE WORKSHOPS

Daughter must have attended at least 2 State Workshops between the ages of 16-20.

Date	Workshop	BG Initials

#### ATTENDANCE AT OTHER STATEWIDE ACTIVITIES

Daughter must have attended at least 1 additional statewide activity (if held) between the ages of 16-20. (Examples: membership rallies, leadership camps, etc.)

Date	Event (e.g. membership rally)	BG Initials

#### STATEMENT OF APPROVAL

I have reviewed the application form and the accompanying checklist, and I attest that this Daughter has met the criteria for the Lily of the Valley Award.

Bethel Originating Nomination: No.:	_Location
Additional Bethel Where Criteria Met: No.:	Location
Additional Bethel Where Criteria Met: No.:	_Location
Date of Bethel Guardian Council's Approval of Nominatio	on:
Signature of Bethel Guardian:	Bethel No.:

# **MUST BE POSTMARKED BY MARCH 1, 2024**

Mail APPLICATION, LETTERS OF RECOMMENDATION, AND MEDALLION FEE to:

Lindsey Spahr, 2023-24 Chair 15813 Cary Street, Omaha, NE 68136 402.450.8978 | lindseyspahr@gmail.com

# LILY OF THE VALLEY AWARD BETHEL GUARDIAN COUNCIL NOMINATION FORM

Nomination forms and letters of recommendation must be typed or printed.

Please use additional sheets as needed.

Name of Daughter being nominated		Bethel No
In your opinion, why is this Daughter worthy of contributions to the Bethel and Job's Daughter		Be specific regarding her
Signature of Bethel Guardian Council Member:		
Title:_	Be	ethel No.:
Signature of Bethel Guardian Secretary:	Be	ethel No.:

## RECOMMENDATION FOR THE LILY OF THE VALLEY AWARD

Nomination forms and letters of recommendation must be typed or printed.

You may type this information into a separate document, but please attach this cover sheet.

Use additional sheets as needed.

Letter of Recommendati	on written by:			
Address:				
	STREET	CITY	STATE	ZIP
Name of Daughter being	g nominated		Bethel No	
How did you become ac	quainted with this Daug	nter and how long have	you known her?	
	ughter's contributions to tion for the Lily of the Va		nughters are outstan	nding and
Signature of Recommen	der:			

Please return this recommendation to the Bethel Guardian to be included in the Application Packet.

Application Packet, with ALL contents, <u>must</u> be postmarked by March 1, 2024.