

VERMONT LIONS HART MEMORIAL AWARD

Lions Clubs International is a global service organization. In 1917 Melvin Jones was a Chicago business leader who told members of his local business club they should reach beyond business issues and address the betterment of their communities and the world. He started what was to become the largest International service organization with over 46,000 local clubs and more than 1.4 million members in over 200 countries around the world.

At the founding of Lions Clubs a main tenet was established of "unselfish service to others". Over one hundred years later that tenet is expressed in the Lions motto "We Serve". Local Lions Club programs have grown to include sight & hearing conservation, diabetes awareness, hunger relief, pediatric cancer, environmental issues, and many other programs.

One of the Vermont's most prestigious Lions was Nelson "Nellie" Hart. Lion Nellie Hart served his country proudly in the U.S. Navy aboard the USS Thor (ARC-4) as a cable layer. After his honorable discharge he continued to serve with the U.S. Naval reserve for much of his prime. Lion Nellie had worked in the fuel industry until his retirement, being employed by Whites Fuels of Castleton and later Johnson & Johnson Fuel Company.

Lion Nellie had one of the biggest hearts a community could ever hope to have. He proudly devoted much of his time to the Free and Accepted Masons - Lee Lodge #30 as well as the American Legion - Crippen-Fellows Post 50. He became a member of the Castleton Lions Club and later served as Vice District Governor from 1989-90; District Governor 1990-91; Secretary, Vice President and President of the New England Lions Council; Vice President of Vermont Lions Charities; and as a Director of Lions Twin State Soccer. During his 32 year membership he received high recognition for his service and was awarded the Melvin Jones Fellow award in 1991. In 2004 he was awarded the Progressive Melvin Jones Fellow as well as the International President's Leadership Award.

On March 2, 2005 after a brave battle with cancer, Lion Nellie past away. Lion Nellie Hart was a man of kindness and of great heart. As his daughter Penny Wearing quoted, "Our Dad Nellie Hart was a wonderful man." So it is with great honor that we proudly dedicate the Vermont Lions Disability Award in name of Lion Nelson Hart.

The Vermont Lions Hart Memorial award is presented to a graduating high school senior that has a disability or debilitating illness, either physically or mentally, and is planning to attend college upon graduating high school. The recipient of the award will receive a \$1,000 to further their education and will also be honored with a Vermont Lions Hart Memorial plaque.

Yours in Lionism – Danielle Coulombe, award creator

Dear Applicant,

A complete Vermont Lions Hart Memorial award submission will contain:

- ☐ Completed Application (page 3) with essay attached.
- ☐ A copy of your high school transcript. This need not be an official copy.
- ☐ One letter of recommendation from a teacher.
- ☐ One letter of recommendation from a doctor overseeing your care.
- ☐ A copy of your college acceptance letter.
- ☐ Completed financial need form (page 4).
- ☐ Signed HIPPA release form (page 5).

All materials should be presented in a portfolio folder with the HIPPA release attached to the outside of the folder. The folder will not be opened unless the HIPPA release is visible.

Mail to:

Hart Memorial Award
c/o Cathy Coulombe
18 Golf Course Rd
Richford, VT 05476

Deadline for submission is March 8th each year.

Questions can be answered by contacting either of the award co-chairpersons:

Lion Cathy Coulombe
802-848-3645
ccdccoulombe@gmail.com

Lion Travis Lebel
802-782-4687
travislebel@yahoo.com



Hart Memorial Award Application

Name _____ Age _____ DOB ____ / ____ / ____

Address _____

Phone # _____ Name of High School _____

Date of Graduation _____ Grade Point Average _____

Where will you be furthering your education? _____

Address of the above: _____

Intended major or discipline of study (if you are undecided write N/A) _____

Name of Doctor associated with your disability/illness _____

Doctor's telephone # _____

Doctor's mailing address _____

May we contact your doctor? _____

Please attach an essay in 200 words or more describing how you have managed with your disability or debilitating illness. Your essay is a primary factor in the selection. Please include what you feel are some of your strongest insights or achievements.

FINANCIAL STATEMENT

NAME: _____

	INCOME 1	INCOME 2	OTHER
WAGES, TAXES, TIPS			
AID TO THE AGED			
AID TO THE BLIND			
AID TO THE DISABLED			
AID TO INDEPENDENT CHILDREN			
UNEMPLOYMENT COMPENSATION			
COURT ORDERED SUPPORT			
SOCIAL SECURITY INCOME			
PENSION			
OTHER INCOME			
OTHER INCOME			

TOTAL ANNUAL HOUSEHOLD INCOME \$ _____

NUMBER OF FAMILY MEMBERS ON ABOVE INCOME(S) ADULTS ____ MINORS ____

HOW LONG HAS THE FAMILY LIVED AT THE PRESENT RESIDENCE ____ YEARS.

APPROXIMATE VALUE OF FAMILY ASSETS \$ _____

MONTHLY EXPENSES

RENT/MORTGAGE	
HEALTH INSURANCE	
AUTOMOBILE #1	
AUTOMOBILE #2	
HEATING FUEL	
ELECTRICITY	
TELEPHONE	
FOOD	
MEDICAL BILLS	
PERSCRIPTIONS	
HOUSE INSURANCE	
AUTOMOBILE INSURANCE	
SCHOOL TUITION	
LOANS	
TOTAL	\$

HEALTH INFORMATION RELEASE FORM

As required by the Health Insurance Portability and Accountability Act (HIPAA), all applications are confidential and will only be viewed by committee members who have been instructed on the HIPAA laws. Additionally, please sign (or a guardian if applicant is under 18) the release of information form giving us permission to view the application in accordance to HIPAA. Please place this page IN FRONT of the completed application. Without this signed page on top the application will not be viewed.

I, the undersigned, give Vermont Lions District 45 and Vermont Lions Charities, permission to view information regarding to my (or child's) health information for the purpose of the Hart Memorial Award. I understand that the members of the award committee are informed of the HIPAA rules and that none of the information I provide will be released to any third parties without prior written consent. In addition, I am aware that, if selected for the award, my name and contact information will be released to the closest Lions Club and its members so that arrangements for an award presentation can be made. Any additional places for release of my health information will be discussed in person if needed.

Signature of Applicant (or guardian if minor)

Date