

United Cerebral Palsy (UCP) of Eastern CT 42 Norwich Rd., Quaker Hill, CT 06375

Phone: (860) 443-3800 Fax: (860) 443-8272

www.ucpect.org

### 2024 Nathaniel C. Bennett Memorial Award

Dear Caseworker, Administrator or Special Education Teacher,

UCP of Eastern Connecticut presents the Nathaniel C. Bennett Memorial Award every year to recognize an individual with disabilities living in Eastern Connecticut. This award serves in memory of a young boy who spent his short life making others smile. Do you know someone like this? Someone who lives their life without limits? Then please nominate them to receive the 2024 Nathaniel C. Bennett Memorial Award.

#### Qualifications:

An individual with a disability living in New London County, who has overcome challenges attributable to his or her disability, and has demonstrated leadership, volunteerism or achievement of such caliber as to be a significant role model to individuals with or without disabilities.

#### **Process:**

A committee consisting of members of UCP and members of Nathaniel Bennett's family will review nominations. Each nominee will be reviewed via a completed application filled out by a nominator. Nominations must be received by 10/28/2024. Supporting documentation will also be considered. The recipient will be notified one week prior to us presenting the award to them at our annual meeting on November 25, 2024.

#### To submit nominations:

By Mail:	By Fax:	By Email:
Nathaniel Bennett	860-443-8272	staber@ucpect.org
Memorial Award	000 110 01/1	
% UCP of Eastern CT	Attn: Nathaniel Bennett Memorial Award	Subject Line: Nathaniel Bennett Memorial Award
42 Norwich Rd	Committee	Nomination
Quaker Hill, CT 06375		

# Questions may be directed to Shannon Taber at: Telephone: 860-443-3800 x 111 or Email: staber@ucpect.org

## 2024 Nathaniel C. Bennett Memorial Award Application

For the 2024 award, I would like to nominate:		
Name:		
Address:		
Telephone:		
Email:		
	this person should be recognized. Please feel free to submit other added sheets if more space is needed.	
Your information:		
Name:	Title:	
Address:	Phone:	
Fmaile		
Email:		
How you kno	ow the nominee, How long you have known the nominee:	

Signature:	Date: