



NANO NAGLE SERVICE AWARD

In the spirit of Presentation foundress, Nano Nagle, and her desire to serve, the Dubuque Presentation sisters and associates initiate a Nano Nagle Service Award to further her legacy of service. Nano Nagle was a young Irish woman who spent her days teaching those who would have otherwise been deprived of an education and her evenings were spent walking through the streets of Cork, Ireland bringing food and medicine, comfort and hope to those in need. Nano Nagle was a WOMAN of SERVICE. Her life reflected her own words, "If I could be of service in any part of the world, I would gladly do all in my power to do so."

Today the Sisters of the Presentation follow in Nano's footsteps by serving in education, pastoral ministry, chaplaincy and advocacy for the disadvantaged and those made poor throughout the United States and Bolivia.

A \$1,000 Nano Nagle Service Award will be given to a person nominated by a Presentation sister or associate who has been identified as a person of service. This award may be used to further opportunities of service, benefit a service project, help with education related to serving the needs of the poor or in some way aid the nominee in continuing his or her gift of service.

A sister or an associate will fill out a nomination form and return it by **April 1**. The nomination papers will be read and voted upon by a committee of sisters and associates. If you are interested in this award, make inquiries of a Presentation sister or associate.

Return nomination form to:

Nano Nagle Service Award
2360 Carter Road
Dubuque, IA 52001



Nomination Form for the Nano Nagle Service Award

(Please print clearly)

Name of Nominee _____

Address _____

City _____ State _____ Zip _____

Home phone _____ Cell phone _____

Email _____

Reason for nomination: A written response of no less than 250 words and no more than 500 words describing why the nominee qualifies for the Nano Nagle Service Award. Give specific examples of where and how the nominee has demonstrated the quality of self-giving service. (The form may be handwritten or typed. Use back of nomination form if needed.)

Submitted by:

Name _____

Address _____

City _____ State _____ Zip _____

Home phone _____ Cell phone _____

Email _____