



## Project Nomination Form For Volunteer Assistance

Name of Project: \_\_\_\_\_

Description of Activity:

Timing and Duration: From \_\_\_\_\_ To \_\_\_\_\_  
(Date) (Date)

Suggested Project Director(s) to be responsible for activity:

Name: \_\_\_\_\_

Submitted by:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Incidental funding requested (normally not to exceed \$300): \_\_\_\_\_

Specific use of funding \_\_\_\_\_

Submit to: Bill Pardue, Volunteer Coordinator, ORNL Office of Communications and  
Community Outreach (Address: ORNL, P.O. Box 2008, Oak Ridge, TN 37830-  
6266, ORTpk, MS 6491, E-mail: [78b@ornl.gov](mailto:78b@ornl.gov); telephone 576-0235)

or

Brenda Hackworth, Manager, Community Outreach (Address: ORNL, P. O. Box  
2008, Oak Ridge, TN 37830-6266, M.S. 6206, E-mail: [hackworthbt@ornl.gov](mailto:hackworthbt@ornl.gov);  
telephone 241-7249)