View results

Respondent

1

Anonymous

	Nominee Details
1.	Name of Nominee *
	Cheryl Powell
2.	Name (as you wish it to appear on award) *
	Cheryl Powell
3.	Home Address *
	4877 college acres dr unit E
4.	City *
	Wilmington
5.	Zip Code *
	28403

Time to complete

6. Phone Number *

9105121842

7. Email Address *

bear06912@gmail.com

Listing of Qualifications

8. Please provide a brief description (maximum 300 words) of the qualifications of the nominee for this award. Give specific information about the nominee's activities in improving the lives of people with intellectual and developmental disabilities, including examples of significant contributions and leadership.

Please include the following:

- List nominee's advocacy experience
- · Areas of strength/experience/achievements in the field of intellectual or other developmental disabilities.
- List nominee's volunteer experience

*

Cheryl Powell works tirelessy to help people with disabilities and to improve there everyday lives. She works with multiple groups on a every day basis. She works with legislation to help improve lives of disability community and DSPs.

Supporting Information

Identify three (3) individuals who have knowledge of the efforts of the nominee.

NOTE: It is encouraged that individuals submit a short statement (maximum 300 words) in support of the nominee. Statements should include specific examples of work the nominee has done to influence positive change in the lives of people with intellectual and other developmental disabilities.

 Full Name City • Zip Phone, and Email Address Please see next question for short statement submission. William Powell Wilmington NC 28403 9105121842 bear06912@gmail.com 10. Individual 1 - Please provide a short supporting statement of why this nominee should be the recipient of the NC Leadership Achievement Award. If sending an attachment via email, please write "Sending supporting documents via email" in the text box. Please submit your supporting documents by July 10, 2024 to awards@nccdd.org and include the name of the Award and Nominee in the Subject Line (Example: Leadership Award Documents - John Doe) * Cheryl Powell is a amazing person. She works hard on improving the lives of individuals with disabilities. She wants to help give back to the disability community. Cheryl has never met a challenge she couldn't overcome even with her own disability.she is a graduate of uncw with a degree in social work. 11. **Individual 2** - Please provide the following information: Full Name • City Zip • Phone, and Email Address Please see next question for short statement submission. Debra Powell Wilmington nc

9. **Individual 1** - Please provide the following information:

28403

4877 college acres dr unit E

12. **Individual 2** - Please provide a short supporting statement of why this nominee should be the recipient of the NC Leadership Achievement Award.

If sending an attachment via email, please write "Sending supporting documents via email" in the text box. Please submit your supporting documents by July 10, 2024 to awards@nccdd.org and include the name of the Award and Nominee in the Subject Line (Example: Leadership Award Documents - John Doe)

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Cheryl Powell works countless hours try to improve the lives of individuals with disabilities. Whether it's a zoom meeting or in person meeting she gives it her all no matter how tired she is.

- 13. **Individual 3** Please provide the following information:
 - Full Name
 - City
 - Zip
 - Phone, and
 - Email Address

Please see next question for short statement submission. *

Danny Bradshaw Wilmington NC 28403

14. **Individual 3** - Please provide a short supporting statement of why this nominee should be the recipient of the NC Leadership Achievement Award.

If sending an attachment via email, please write "Sending supporting documents via email" in the text box. Please submit your supporting documents by July 10, 2024 to awards@nccdd.org and include the name of the Award and Nominee in the Subject Line (Example: Leadership Award Documents - John Doe) *

Cheryl is a loving person who cares for everyone. Even with her disability she was raised to live her life like she didn't have one. She was always told by her parents there was nothing she couldn't overcome. That's how she goes about her life today. She always fights for the rights of people with disabilities.

Personal References

Identify three (3) individuals as personal references who may be contacted to help evaluate the qualifications of the nominee.

Full Name Phone Imail Address Imai	15. l ı	ndividual 1 - Please provide the following information:
Phone Email Address * Brendan 910 4734165 6. Individual 2 - Please provide the following information: Full Name Phone Email Address * William Powell 9105121842 bear06912@gmail.com 7. Individual 3 - Please provide the following information: Full Name Phone Email Address * Debbie Powell 9103521223 Nominator Information 8. Full Name *		Full Name
* Brendan 910 4734165 6. Individual 2 - Please provide the following information: • Full Name • Phone • Phone • Email Address * William Powell 9105121842 bear06912@gmail.com 7. Individual 3 - Please provide the following information: • Full Name • Phone • Email Address * Debbie Powell 9103521223 Nominator Information 8. Full Name *		
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Debbie Powell 9103521223 Nominator Information 8. Full Name *	17. l i	Full NamePhone
Nominator Information 8. Full Name *	,	
8. Full Name *		
8. Full Name *		
		Nominator Information
William Powell	18. F	ull Name *
**************************************		William Powell

19.	Title/Relationship to the nominee *
	Husband
20.	Email *
	bear06912@gmail.com
21.	Organization (if applicable):
22.	Street Address *
	4877 college acres dr unit E
23.	City *
	Wilmington
24.	Zip Code *
	28403
25.	Phone Number *
	9105121842
26.	Email Address *
	bear06912@gmail.com

27.	
	I've read and followed the submission guidelines for my application to be considered for the 2024 Advocacy and Leadership Awards. I understand my application will not be considered if the following documents are not
	completed or submitted to NCCDD by July 10, 2024.
	☐ Section 1: Completed Nominee Information
	☐ Section 2: Completed with Listing of Qualifications
	☐ Section 3: Completed with Short Statements of Support
	☐ Section 4: Completed Personal References
	□ Submitted ON OR PRIOR TO, Wednesday, July 10, 2024.
	*
	Section 1: Completed Nominee Information
	Section 2: Completed 'Listing of Qualifications'
	Section 3: Completed 'Short Statements of Support' (emailed to awards@nccdd.org)

Section 4: Completed Personal References

Submitted on or Prior to Wednesday, July 10, 2024