



## Community Commitment Award

2020

**EXTENDED!**

**Deadline for submission is August 1, 2020**

**Watch for further information on modifications to the Award program.**

### Basic Criteria

- Residents/Elders must be actively involved in the development and implementation of the program
- The program can take place in any level of care community
- The program must in some way be serving the greater community (town, city, state, nation) or the greater good
- The program must have been fully operational for at least 6 months
- OR
- The program was developed in response to the needs to stay connected and support the greater community as identified through the COVID-19 crisis
- The program must incorporate Residents/Elders, demonstrating ***hands on*** participation and being a part of program leadership

### Using this document to complete your application

- Save this document on your computer
  - Use the following process to name the Application document:
    - ***Community Name Application***  
*i.e. Happy Home Application*
  - This document is a fillable PDF. All fields must be completed before this form can be considered for review.

For questions pertaining to the form or the process, please **email** Joan Devine, Director of Education at [joan.devine@pioneeretwork.net](mailto:joan.devine@pioneeretwork.net)

---

## PLEASE COMPLETE ALL FIELDS

**Information about the individual completing this application** (this person will be the contact person throughout the application process)

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

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

Organization: \_\_\_\_\_

Title: \_\_\_\_\_

Address of Care Community: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Country (if other than US): \_\_\_\_\_

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

Cell Number: \_\_\_\_\_

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

Website: \_\_\_\_\_

### Level of Living

☐ Adult Day Care

☐ Affordable Housing

☐ Assisted Living

☐ Independent Living

☐ Memory Care

☐ Nursing Home

☐ Other \_\_\_\_\_

**Program Information**

Name of the Program: \_\_\_\_\_

Date Program was launched (approximate) \_\_\_\_\_

Tell us about the team who developed this program (i.e. who they were, their roles in the community, the talents each person brought to the team)

---

---

---

How does this program enhance meaning and purpose for the Elders who participate in it?

---

---

---

How does this program benefit the care community?

---

---

---

Who is/are the greater community partner(s)?

---

---

---

How does this program serve the greater community? What need is it meeting?

---

---

---

What is the plan for sustaining this program?

---

---

---

Describe any challenges that you have had to overcome in developing your program (i.e. buy-in from the greater community, gaining the support of Residents/Elders, staff or organizational leadership, obtaining necessary funding) and how you overcame these challenges.

---

---

---

Describe how you support increased Residents'/Elders' participation in the program. (i.e. a resident with significant cognitive or physical challenges or someone who may have been isolated / did not engage with others). *Include how you used innovation, the adaptation of equipment or processes, or other means in order to support the ability of Residents/Elders to serve?*

---

---

---

---

---

### **Additional information required**

Please include the following testimonials (written or short video):

- Testimonial from a resident who is involved in the program
- Testimonial from a care community staff member
- Testimonial from community partner
- Testimonial of a family member

**We encourage you to provide any additional information that will help us to better understand your program. (i.e. photos, brochures, flyers from events)**

Videos supporting your application, showing your program in action, are strongly encouraged. They do not need to be professionally made. For tips on creating a short video on your cell phone, [click here](#).

---

## Submitting your application

- After completion, submit the application and all supporting documents by uploading them using the UPLOAD link at <https://www.pioneernetwork.net/about-us/overview/community-commitment-award/community-commitment-awards-application/> or by emailing to [joan.devine@pioneernetwork.net](mailto:joan.devine@pioneernetwork.net)
- Testimonials can be on one document/one video or submitted as individual documents/videos
  - Use the following process to name testimonials
    - ***Community Name Testimonial All, or Community Name Testimonial Resident***
      - i.e. Happy Home Testimonial Resident, Happy Home Testimonial Staff

If submitting additional documents to support your application, please name them using the community name followed by what they are

- Happy Home Program Brochure, Happy Home Photo1, Happy Home Photo2, etc.
  - If video submission is on YouTube. please provide the link
-