



MIKE DELISA LEADERSHIP AWARD NOMINATION FORM

The San Diego community lost a great advocate for people with developmental disabilities when Mike DeLisa passed away in October 2000. In his 60 plus years, Mike represented people with developmental disabilities as determined, active, fun loving, caring members of the community who knew what they wanted, and were willing to take on the responsibilities that came along with these things. Mike refused to allow people to treat him as less than equal. What he had to say was important, and people came to realize that. Because of his tenacity in overcoming obstacles in his path, Mike earned the respect and admiration of the entire community. Due to his outstanding leadership and encouragement to others, P.R.I.D.E. Inc. and San Diego People First established the **"Mike DeLisa Leadership Award"**, which is presented annually at the San Diego People First Self-Advocacy Conference.

Do you know someone like Mike? What we are looking for is an individual with a developmental disability who is working to change the face of disability in the community. The recipient of this award should demonstrate their ABILITY in all they do and be a resident of San Diego County. Is there someone out there that changed YOUR mind about what disability is?

A selection committee of People First Officers and Conference Planning Committee members will consider the nominations submitted and choose the recipient for this year's award. The Mike DeLisa Leadership Award will be presented at the 27th Annual San Diego People First Self-Advocacy Conference on June 2nd, 2017.

Please return this form by May 12th, 2017.

Self-Advocacy Conference
C/O: United Cerebral Palsy
8525 Gibbs Drive, Suite 209
San Diego, CA 92123
Fax: (619) 282-5133 Email: Lkrebs@ucpsd.org

Who are you nominating for this award?

Name: (nominee) _____

Address: (nominee) _____

Telephone Number: (nominee) _____

PLEASE COMPLETE THE BACK OF THIS FORM

*Questions about San Diego People First or the annual Self-Advocacy Conference?
Contact Laura Krebs at 858-278-5420 x. 132, Lkrebs@ucpsd.org*



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Why do you think this person should be selected to win this award? (Attach additional sheets if needed)

Thank you for your nomination.

Your Name: _____

Your Address: _____

Your Telephone Number: _____

Please send your completed form to:

Self-Advocacy Conference
C/O: United Cerebral Palsy
8525 Gibbs Drive, Suite 209
San Diego, CA 92123

Or submit your nomination via email to Lkrebs@ucpsd.org

Nomination forms must be received no later than May 12th, 2017.

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