



GEORGIA DEPARTMENT OF
COMMUNITY HEALTH

**GEORGIA VOLUNTEER HEALTH CARE
PROGRAM**



**VOLUNTEER RECOGNITION
NOMINATION SCHEDULE**

Volunteer of the Quarter

Quarter	Nomination Deadline	Selection of Volunteer
First Quarter (July 1 – September 30)	October 31 st	November 30 th
Second Quarter (October 1 – December 31)	January 31 st	February 28 th
Third Quarter (January 1 – March 31)	April 30 th	May 31 st
Fourth Quarter (April 1 – June 30)	July 31 st	August 31 st

Volunteer of the Year

Fiscal Year	Nomination Deadline	Selection of Volunteer Deadline
(July 1 – June 30)	July 31 st	August 31 st