

The 19th Temple Awards for Creative Altruism

*“I don’t know what your destiny will be, but one thing I know:
The only ones among you who will be truly happy
are those who have sought and found how to serve.”*

— Albert Schweitzer



The 19th Temple Awards for Creative Altruism
will be presented at the IONS International Conference

July 22–26, 2015, in Oak Brook, Illinois (Chicago suburb)



The **Temple Awards for Creative Altruism** are presented to two
outstanding altruists whose lives and work embody the inspirational light
of unselfish service motivated by love.

An award fund of \$25,000 is divided between the two recipients each award year.

The deadline for nominations for the 2015 Awards is January 2, 2015.

Contact Rose Welch at 707-779-8214 or rose@noetic.org.

Selection Criteria

- ☞ Inspires altruism, generosity, and caring in others.
- ☞ Makes significant contributions to humanity that serve as a model of creative altruism.
- ☞ Manifests sustained commitment to altruistic ideals, and has personal qualities that support this commitment.
- ☞ Engages in regular and consistent actions which benefit others.
- ☞ Is loving, compassionate, kind, and nonviolent in his or her relationships.

Nomination Guidelines

Please provide information on the candidate in these areas:

- ☞ Current activities that exhibit creative altruism.
- ☞ Relevant aspects of the candidate's background.
- ☞ Personal characteristics and qualities.
- ☞ Vision or philosophy as expressed in his or her life.
- ☞ Nature of the candidate's influence on others.

Mail or Fax Nominating Form to

Rose Welch
Temple Awards for Creative Altruism
Institute of Noetic Sciences
625 2nd St., #200
Petaluma CA 94952
707-781-7420 / fax

Your Nominee

NAME

ADDRESS

CITY

STATE ZIP

COUNTRY

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TELEPHONE: HOME/WORK

EMAIL

References

Please list two people who can provide additional information about the nominee.

NAME

ADDRESS

CITY

STATE ZIP

COUNTRY

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TELEPHONE: HOME/WORK

EMAIL

NAME

ADDRESS

CITY

STATE ZIP

COUNTRY

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TELEPHONE: HOME/WORK

EMAIL

Nominated by

NAME

ADDRESS

CITY

STATE ZIP

COUNTRY

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TELEPHONE: HOME/WORK

EMAIL

Your Nomination

Please attach additional sheets if necessary.

Thank you for your nomination!