

## ***Ann Villani Memorial Award Nomination***

**The Mission of the Ann Villani Memorial Award is to provide a once in a lifetime award in memory of a truly gifted individual who saw her commitment to anything equine as a way of life. Ms. Villani was a rare individual – she had extraordinary understanding and compassion for all animals, a trait that she taught others to bring to their relationships with their horses. *Ann's compassion for animals and passion for riding enabled her to be a gifted horsewoman who truly loved Dressage.***

The Scholarship Committee will review award nominations and the award decision will be submitted to the Board of Directors. The Committee will meet in the first to second week of October following the nomination deadline. All review discussion will be confidential; decisions of the Committee are final.

- 1) Nominees must be U.S. citizens or permanent U.S. residents having a Green Card and current members in good standing of the New England Dressage Association.
- 2) This is designed to be a once in a lifetime award. Once granted this award, a person cannot be nominated again. Any member who has already received a scholarship from NEDA is eligible for this award.
- 3) Any member of the Scholarship Committee can be nominated; however, Committee members cannot nominate a candidate, whether from the Committee or the membership at large.
- 4) A candidate must be a NEDA member who has been nominated by a fellow NEDA member. The person nominating the candidate will request a nomination form with specific questions designed to determine a candidate's commitment to NEDA, the Equine Athlete, Education and the Equine community.
- 5) The award will be given to the candidate who best exemplifies the qualities that made Ann so special: dedication, commitment to volunteerism, positive attitude, hard work, quest for continuing education, ongoing pursuit of excellence, and fairness.
- 6) There will be no restrictions in the way the award is used, however, it is hoped that it will be used to benefit the nominee's dressage pursuits.
- 7) The award will be given once a year provided a candidate who meets the above criteria is nominated, in the amount of \$1,000. Nominations are due by October 1.

Nominations must be submitted & received by **October 1<sup>st</sup>**. (Exceptions in unusual circumstances may be made.)

Submit completed nominations and all accompanying materials to:  
Samantha Williams, 9 Nags Head Rd., Ipswich, MA 01938  
[scholarships@neda.org](mailto:scholarships@neda.org)



## *Award Nomination*

**Please answer all questions as completely and in as great a detail as possible.** If you need more room, attach separate sheets to this application. Be sure each additional sheet is identified by Nominee's name.

---

**I am nominating \_\_\_\_\_ to the New England Dressage Association for the Ann Villani Memorial Award.** I recognize that the Scholarship Committee may request additional verification as well as a personal interview.

Your name: \_\_\_\_\_

Address and Phone \_\_\_\_\_

1. How long have you known this person and in what capacity? \_\_\_\_\_

\_\_\_\_\_

2. Why are you nominating this individual for this award? Give qualities of dedication, commitment to volunteerism, positive attitude, hard work, ongoing pursuit of excellence, and fairness; please give as many examples as possible how the Nominee fulfills these:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3a. Describe the Nominee's volunteer activities for NEDA:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3b. Volunteer history with other organizations (including non-equestrian orgs):

\_\_\_\_\_

\_\_\_\_\_

4. Please give some specific examples and explain the Nominee's commitment to dressage education:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

---

---

---

5. What impact/achievements has this person made to the sport and art of Dressage and the Equine Community?

---

---

---

---

---

---

---

---

6. Is there anything else you would like to tell us about the Nominee:

---

---

---

---

7. Please list 4 references with contact information (address or phone number) who know the Nominee well, and their relationship to the Nominee.

| NAME | CONTACT INFO | RELATIONSHIP |
|------|--------------|--------------|
|      |              |              |
|      |              |              |
|      |              |              |
|      |              |              |

*Signature of Nominating Party:* \_\_\_\_\_  
*Date of Nomination:* \_\_\_\_\_