

2023 ACCW Golden Rose Award

The Dubuque Archdiocesan Council of Catholic Women (ACCW) recognizes a young woman who has made a significant contribution to their parish and community in service and leadership.

A nominee for this award should be:

- A young woman, age 14-21, who resides in the Archdiocese of Dubuque
- A practicing Catholic who attends Sunday Mass regularly
- An active member of her parish who shows leadership, goes above and beyond in activities and service projects (youth groups, ministries, volunteer work, etc.), and is an outstanding role model of service to others in her community
- A faithful servant who reflects the Gospel values in her everyday life,
- A young woman who abides by the mission of the ACCW as “a voice for the women of the Dubuque Archdiocese to speak and act as a unit on matters of mutual interest”

To nominate a young woman for this award, please complete the Nomination Form below. Please provide:

- A **description** (two pages or less) of your nominee that addressed the above-mentioned criteria. Describe her Church activities, community involvement, leadership, spirituality, education, and other relevant personal information and service, as well as any ACCW or NCCW involvement if applicable.
- A **signature** indicating the parish pastor’s approval (found at the bottom of the form below)

Nominations open June 1, 2023 and close on September 15, 2023.

The award presentation will take place at the ACCW Annual Meeting on **Saturday, October 21, 2023.**

Return the nomination form to Barb Sauser, 636 Highway 136 N Cascade, Iowa 52033
or email sbsauser@netins.net no later than September 15, 2023.

2023 ACCW Golden Rose Award Nomination Form

Nominee: _____ **Parish/City:** _____

Address: _____ **City:** _____ **Zip Code:** _____

Please attach the following:

- A **description** (two pages or less) of your nominee that addressed the above-mentioned criteria. Describe her Church activities, community involvement, leadership, spirituality, education, professional experience and other relevant personal information and service and any ACCW or NCCW involvement if applicable
- A **signature** indicating the parish pastor’s approval (found at the bottom of the form below)

Nominated by:

Name: _____ **Parish/City:** _____ **Phone:** _____

Address: _____ **City:** _____ **Zip Code:** _____

Pastor’s Approval

Pastor’s Signature: _____

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