

THE AMERICAN LEGION DEPARTMENT OF NEBRASKA P.O. BOX 5205 LINCOLN, NE 68505-0205

FIREFIGHTER / EMS OF THE YEAR APPLICATION FORM

PURPOSE: The goal of this program is to select a well-rounded Firefighter/EMS who has exceeded, above and beyond, the duty requirements expected of his/her position and has demonstrated a distinct pattern of community service coupled with professional achievement. A major secondary purpose is to promote the public trust and support of our Fire Departments and personnel.

To be eligible for consideration, candidate must:

- Be a citizen of the United States, male or female
- Be a living, active, Firefighter / EMS.
- Be assigned to, or fully recognized by, Municipal (City), County, District or State Fire Department
- Nominees selected for this award should be available to receive this award at The American Legion, Department of Nebraska mid-year convention in January.

Application packets should include: 1) Completed application form; 2) 5"x7" photograph of nominee; 3) A maximum of 18 one-sided pages of service documentation (service narrative, supporting citations, press articles and recommendation by his/her Supervisor).

APPLICATION PACKAGE MUST RECEIVED AT DEPARTMENT HEADQUARTERS BY DECEMBER 1ST.

OFFICER INFORMATION											
RANK	FIREFIGHTER/EMS NAME (Last, First MI)				AGE	SEX	MARITAL STA	TUS	SPOUSE NAME		
						M F					
STREET ADDRESS				CITY				ST	ZIP CODE		
HOME PHONE WO			VORK PHONE			CELL PHONE			SERVICE YRS		
AGENCY (DEPARTMENT) INFORMATION											
AGENCY NAME					AGENCY ADDRESS						
AGENCY DIRECTOR			TITLE		AGENCY CITY				ST	ZIP CODE	
NOMINEE'S SUPERVISOR TITLE				AGENCY PHONE			AGI	AGENCY FAX			
AMERICAN LEGION USE ONLY - DO NOT WRITE BELOW THIS LINE											
DEPARTMENT			LA	AW AND ORDER CHAIRMAN				PHONE			
NEBRASKA											
CHAIRMAN STREET ADDRESS				CITY				ST	ZIP CODE		
DEPARTMENT ENDORSEMENTS											
DEPARTMENT COMMANDER					SIGNATURE				DATE		
DEPARTMENT ADJUTANT					SIGNATURE				DATE		