



THE MICHIGAN AMERICAN LEGION DEPARTMENT FIREFIGHTER OF THE YEAR AWARD

Purpose of Award: To recognize a well-rounded Michigan Firefighter, who has exceeded, above and beyond, the duty requirements expected of their position and has demonstrated a distinct pattern of community service coupled with professional achievement. Episodes of heroism will, of course, also be included where noted.

Material: Enclose relevant documentation on the nominee in the following area; community service, professional career, heroism, letters of recognition, news, and other substantiating documentation should not exceed 18 one-sided pages, on 8x11 bond paper – first six or seven pages should contain the individual's service narrative. Include a copy of your nominee's State or Federal certification as a firefighter, as well as copies of pertinent training and education certificates as appropriate. The additional pages may include supporting citations and other documentation to include press articles.

Photograph: A 5 x 7 photograph of the nominee.

Deadline: **January 5, 2018**

Mail to: The American Legion
Department of Michigan
Attn: Programs
212 N. Verlinden Avenue, Ste. A
Lansing, MI 48915

Notification of Nominee: Advancing nominee to National will be notified by email address

Eligibility Criteria: To be eligible for consideration, Department nominees must meet the following criteria:

- A. Be a citizen of the United States, male or female
- B. Be a certified, living, active, full-time, paid, or volunteer firefighter.
- C. Consideration for a posthumous award will be acceptable only, if the nominee's death has occurred after the Department's selection and within the dates for which the award is being presented.
- D. Be assigned to, or fully recognized by, Municipal (City), County, District, State or Federal firefighter officer.
- E. Nominee need not be veterans nor members of the American Legion
- F. Reside and be assigned or attached for duty in Michigan

JUDGING GUIDELINES;

Each nominee is judged according to the following criteria: community service, professional career, heroism, letters of recognition, news clippings, and other substantiating documentation.

**THE MICHIGAN AMERICAN LEGION
DEPARTMENT FIREFIGHTER OF THE YEAR
APPLICATION FORM**

Date _____

Name _____ Male Female

Home Address _____

City _____ State Michigan Zip _____ Phone (____) _____

Email Address _____

Age _____ Marital Status _____ Spouse's Name _____

Length of service as a Firefighter _____

Nomination Agency Name _____

Nominating Agency Director _____ Title _____

Nominee's Supervisor _____ Title _____

Email Address of Nominee's Supervisor _____

Agency Address _____

City _____ State Michigan Zip _____ Phone (____) _____

Michigan Legion Post Associated with Nomination _____

FAILURE to use this form will result in the DISQUALIFICATION of your nominee. It should be placed as the COVER SHEET for your packet of materials, supporting your candidate. Include an official 5x7 photograph of the nominee. The ORIGINAL COPY of the entire application is DUE NO LATER THAN JANUARY 5, 2018 to The American Legion, Department of Michigan, Attn: Programs, 212 North Verlinden Avenue, Ste. A, Lansing, Michigan, 48915.