

COOPER AWARD

REPORT FORM FOR JUNE 1 TO MAY 31

The Department Americanism Awards are distributed each year at the Department Convention. To compete for the Americanism Awards fill out the Award form and Certification form (on the following page) for each award that you are competing for and submit no later than **JUNE 1st** of each year.

The Cooper Award is awarded annually to that Post of The American Legion, Department of Wisconsin doing the most consistent service in the interest of the boys between the ages of 8 and 18. **NOTE:** Attach a separate sheet(s) explaining activities in detail, such as clippings of activities, certified copies of receipts for money expended, other evidence to substantiate the report, photographs or any other activities not mentioned.

Post No. _____ Post City _____ Membership _____

1. Boy Scouts or Sea Scouts: _____

2. American Legion Baseball: _____

3. Other Junior Sports carried on by the Post this year: _____

4. Junior Musical Organizations: _____

5. Awards-School Awards, etc.: _____

6. Social Activities: _____

7. Recreational Facilities and Activities: _____

8. Badger Boys State: _____

9. Sons of The American Legion: _____

10. Miscellaneous: _____

COOPER AWARD CERTIFICATION FORM

Dear Post Adjutant,

In order to be eligible for the Cooper Award, the Report Form on the previous page must be filled out in its entirety.

The Post Adjutant, with the assistance of the Post Commander, has the responsibility to see that the report is properly executed and returned to Department Headquarters not later than **JUNE 1**.

In preparing the report, answer 'NO' if your Post does not engage in the particular activity. For activities the Post participates in, answer clearly and briefly. If an explanation is necessary, attach a separate sheet(s) explaining activities in detail.

The certification form provided below must be completed in order for your Post to be eligible for the Cooper Award.

CERTIFICATION FORM

For: Cooper Award

This certifies that the programs described on the Cooper Award Report Form have been conducted by:

Post No: _____ Post Address: _____

City: _____ Zip Code: _____

Signature: _____

Post Americanism Chairman

Certified by: _____

Post Commander or Adjutant

Date: _____

MCCOY & O.W. ROLFE AWARDS

REPORT FORM FOR JUNE 1 TO MAY 31

The Department Americanism Awards are distributed each year at the Department Convention. To compete for the Americanism Awards fill out the Award form and Certification form (on the following page) for each award that you are competing for and submit no later than **JUNE 1st** of each year.

McCoy Americanism Award

Awarded annually to that Post of The American Legion, Department Wisconsin whose membership is 151 or more, doing the most work in Americanism, providing the membership of that Post is no less than eighty percent of its membership of the preceding year.

O.W. Rolfe Americanism Award

Awarded annually to that Post of The American Legion, Department of Wisconsin whose membership is 150 or less, doing the most work in Americanism, providing the membership of that Post is no less than Eighty percent of its membership of the preceding year.

NOTE: Attach a separate sheet(s) explaining activities in detail, such as clippings of activities, certified copies of receipts for money expended, other evidence to substantiate the report, photographs or any other activities not mentioned.

Post No. _____ Post City _____ Membership _____

1. Campaign to "Get Out The Vote": _____
2. Education in voting: _____
3. Memorial Day Program: _____ How many cemeteries visited: _____
Number of Legion markers placed on graves: _____ Others: _____
4. Veterans Day Program: _____ Was there a speaker: _____
Public: _____ Post only: _____
5. Independence Day Program: _____ Was there a speaker: _____
6. Number of other patriotic programs: _____ Submit evidence.
7. Number of patriotic speakers furnished: _____
8. Patriotic instruction in school and to public: _____
9. Department Oratorical Contest: _____
10. National Education Week Observance: _____
11. Flag codes framed and presented: _____
12. Number of Flag Codes distributed: _____ To whom: _____
13. Number of flag books presented: _____ To whom: _____
14. Flags presented: _____ To whom: _____
15. Flag essay contest: _____ How many written: _____
16. Education of flag etiquette and display: _____ How: _____
17. How many patriotic films shown: _____ List titles: _____
18. Citizenship classes promoted: _____
19. Naturalization Program: _____ How many naturalized: _____
20. Local or County Government Day: _____
21. Any other Americanism or patriotic activity: _____

MCCOY & O.W. ROLFE AWARDS CERTIFICATION FORM

Dear Post Adjutant,

In order to be eligible for the McCoy or O.W. Rolfe Award, the Report Form on the previous page must be filled out in its entirety.

The Post Adjutant, with the assistance of the Post Commander, has the responsibility to see that the report is properly executed and returned to Department Headquarters not later than **JUNE 1**.

In preparing the report, answer 'NO' if your Post does not engage in the particular activity. For activities the Post participates in, answer clearly and briefly. If an explanation is necessary, attach a separate sheet(s) explaining activities in detail.

The certification form provided below must be completed in order for your Post to be eligible for the McCoy or O.W. Rolfe Award.

CERTIFICATION FORM

For: McCoy and O.W. Rolfe Awards

This certifies that the programs described on the McCoy or O.W. Rolfe Awards Report Form have been conducted by:

Post No: _____ Post Address: _____

City: _____ Zip Code: _____

Signature: _____

Post Americanism Chairman

Certified by: _____

Post Commander or Adjutant

Date: _____

PENDILL & HARVEY V. HIGLEY AWARDS

REPORT FORM FOR JUNE 1 TO MAY 31

The Department Americanism Awards are distributed each year at the Department Convention. To compete for the Americanism Awards fill out the Award form and Certification form (on the following page) for each award that you are competing for and submit no later than **JUNE 1st** of each year.

Pendill Award

Awarded annually to that Post in The American Legion, Department of Wisconsin whose membership is 200 or more, accomplishing the greatest civic achievement for the preceding year.

Harvey V. Higley Award

Awarded annually to that Post in The American Legion, Department of Wisconsin whose membership is between 15 and 199, accomplishing the greatest civic achievement for the preceding year.

NOTE: Attach a separate sheet(s) explaining activities in detail, such as clippings of activities, certified copies of receipts for money expended, other evidence to substantiate the report, photographs or any other activities not mentioned. Check with your Adjutant, Service Officer, Historian and Committee Chairmen.

Post No. _____ Post City _____ Membership _____

1. Health: _____

2. Education: _____

3. Social Work: _____

4. Employment: _____

5. Recreation: _____

6. Music: _____

7. Beatification of Town or City: _____

8. Entertainment: _____

9. Memorials: _____

10. Youth Activities: _____

11. Miscellaneous: _____

PENDILL & HARVEY V. HIGLEY AWARDS
CERTIFICATION FORM

Dear Post Adjutant,

In order to be eligible for the Pendill or Harvey V. Higley Award, the Report Form on the previous page must be filled out in its entirety.

The Post Adjutant, with the assistance of the Post Commander, has the responsibility to see that the report is properly executed and returned to Department Headquarters not later than **JUNE 1**.

In preparing the report, answer 'NO' if your Post does not engage in the particular activity. For activities the Post participates in, answer clearly and briefly. If an explanation is necessary, attach a separate sheet(s) explaining activities in detail.

The certification form provided below must be completed in order for your Post to be eligible for the Pendill or Harvey V. Higley Awards.

CERTIFICATION FORM

For: Pendill and Harvey V. Higley Awards

This certifies that the programs described on the Pendill or Harvey V. Higley Awards Report Form have been conducted by:

Post No: _____ Post Address: _____

City: _____ Zip Code: _____

Signature: _____

Post Americanism Chairman

Certified by: _____

Post Commander or Adjutant

Date: _____

ATHLETICS AND SPORTS FOR SPALDING VICTORY AWARD

REPORT FORM FOR JUNE 1 TO MAY 31

The Department Americanism Awards are distributed each year at the Department Convention. To compete for the Americanism Awards fill out the Award form and Certification form (on the following page) for each award that you are competing for and submit no later than **JUNE 1st** of each year.

The Athletics and Sports for Spalding Victory Award is awarded annually to that Post of The American Legion, Department of Wisconsin sponsoring the most intensive program of diversified sports. **NOTE:** Attach a separate sheet(s) explaining activities in detail, such as clippings of activities, certified copies of receipts for money expended, other evidence to substantiate the report, photographs or any other activities not mentioned.

Post No. _____ Post City _____ Membership _____

1. Did your Post sponsor American Legion Baseball? _____
 2. Number of teams for local competition: _____
 3. Total number of boys out for Baseball: _____
 4. Was your team officially entered in State competition? _____
 5. Give cost of Baseball to your Post for the year: \$ _____
 6. Did your Post sponsor a Junior or Senior Hockey Team? _____
 7. Did your Post sponsor a Bowling Team? _____ Number: _____
 8. How many team did your Post enter in the Department Bowling Tournament: _____
 9. Did your Post have Softball Teams? _____ Number: _____
 10. Did your Post sponsor a Curling Team? _____
 11. Was your team officially entered in Department Curling Bonspiel competition? _____
 12. How many Post Golf Contests were sponsored for Legionnaires? _____
 13. Did your Post team enter the Department Golf Tournament? _____
 14. How many members of your Post entered the Department Golf Tournament? _____
 15. Trapshooting? _____
 16. Did your Post enter a Department Trapshooting Contest? _____
 17. Publicity – Amount of publicity given your program will give points but clippings must be enclosed. In order for the publicity to be eligible it must clearly identify American Legion sponsorship.
 18. Other Athletic activities not listed (i.e. tennis horseshoe, football, archery, basketball, swimming, etc.): _____
-

***ATHLETICS AND SPORTS FOR SPALDING
VICTORY AWARD
CERTIFICATION FORM***

Dear Post Adjutant,

In order to be eligible for the Athletics and Sports for Spalding Victory Award, the Report Form on the previous page must be filled out in its entirety.

The Post Adjutant, with the assistance of the Post Commander, has the responsibility to see that the report is properly executed and returned to Department Headquarters not later than **JUNE 1**.

In preparing the report, answer 'NO' if your Post does not engage in the particular activity. For activities the Post participates in, answer clearly and briefly. If an explanation is necessary, attach a separate sheet(s) explaining activities in detail.

The certification form provided below must be completed in order for your Post to be eligible for the Athletics and Sports for Spalding Victory Award.

CERTIFICATION FORM

For: Athletics and Sports for Spalding Victory Award

This certifies that the programs described on the Athletics and Sports for Spalding Victory Award Report Form have been conducted by:

Post No: _____ Post Address: _____

City: _____ Zip Code: _____

Signature: _____
Post Americanism Chairman

Certified by: _____
Post Commander or Adjutant

Date: _____

JESSEL S. WHYTE MEMORIAL AWARD

REPORT FORM FOR JUNE 1 TO MAY 31

The Department Americanism Awards are distributed each year at the Department Convention. To compete for the Americanism Awards fill out the Award form and Certification form (on the following page) for each award that you are competing for and submit no later than **JUNE 1st** of each year.

The Jessel S. Whyte Memorial Award is awarded annually to that Post of The American Legion, Department of Wisconsin that has been outstanding in the promotion of The American Legion School Award Program in its community. **NOTE:** Attach appropriate local newspaper clippings, pictures and other publicity regarding the presentation of the awards. Also attach Award Day or Commencement programs of schools, if available, which lists School Award presentation by The American Legion regarding Legion programs.

Post No. _____ Post City _____ Membership _____

1. Total number of elementary and high schools in community, public/parochial: _____
2. Were all schools invited to participate in the program? _____
3. Number of schools actively participating in the program: _____
4. Total number of awards presented: _____ (to boys _____ to girls _____)
5. Were awards presented at a regular Award Day program? _____
6. Commencement program? _____
7. Who presented the awards? Post Commander: _____ Americanism Chrm: _____
8. Other Post Officer (state title): _____ Post member: _____
9. How many members of the Post participated in, or were present during, the program at which awards were presented? _____
10. Explain below how students, faculties and the entire community were familiarized with the program. Did Legionnaires explain the program to the students and faculty members stressing the five traits of Honor, Courage, Scholarship, Leadership and Service upon which the awards were to be made? Also, was suitable publicity in local papers arranged for, stressing that the sole purpose of the program was the cultivation of high character and wholesome ideals in youth approaching active citizenship? _____

11. Were recipients of awards selected by Po0st Committee guided by the recommendations of school administrator, faculty members and secret ballots cast by members of the graduation class? _____
12. Did publicity in newspapers and school programs clearly identify American Legion sponsorship of this School Award Program? _____
13. Other comments regarding your Post's participation in this program not covered above: _____

JESSEL S. WHYTE MEMORIAL AWARD ***CERTIFICATION FORM***

Dear Post Adjutant,

In order to be eligible for the Jessel S. Whyte Memorial Award, the Report Form on the previous page must be filled out in its entirety.

The Post Adjutant, with the assistance of the Post Commander, has the responsibility to see that the report is properly executed and returned to Department Headquarters not later than **JUNE 1**.

In preparing the report, answer 'NO' if your Post does not engage in the particular activity. For activities the Post participates in, answer clearly and briefly. If an explanation is necessary, attach a separate sheet(s) explaining activities in detail.

The certification form provided below must be completed in order for your Post to be eligible for the Jessel S. Whyte Memorial Award.

CERTIFICATION FORM

For: Jessel S. Whyte Memorial Award

This certifies that the programs described on the Jessel S. Whyte Memorial Award Report Form have been conducted by:

Post No: _____ Post Address: _____

City: _____ Zip Code: _____

Signature: _____
Post Americanism Chairman

Certified by: _____
Post Commander or Adjutant

Date: _____

HENRY C. OAKEY & JAMES F. BURNS AWARDS

REPORT FORM FOR JUNE 1 TO MAY 31

The Department Americanism Awards are distributed each year at the Department Convention. To compete for the Americanism Awards fill out the Award form and Certification form (on the following page) for each award that you are competing for and submit no later than **JUNE 1st** of each year.

Henry C. Oakey Award

Awarded annually to that Post in The American Legion, Department of Wisconsin whose membership is 199 or less, doing the best service work.

James F. Burns Award

Awarded annually to that Post in The American Legion, Department of Wisconsin whose membership is 200 or more, doing the best service work.

NOTE: Attach a separate sheet(s) explaining activities in detail, such as clippings of activities, certified copies of receipts for money expended, other evidence to substantiate the report, photographs or any other activities not mentioned.

Post No. _____ Post City _____ Membership _____

POST SERVICE OFFICER:

Name: _____ Address: _____

NOTE: If the County Service Officer is also the Post Service Officer, this report should be compiled on the basis of Post Activity alone.

1. No. of claims handled: _____ No. of claimants contacted: _____

2. No. of veterans hospitalized: _____ Other treatment secured: _____

3. Employment found: _____ Job training opportunities found: _____

4. Number of veterans sent to Camp American Legion: _____

5. **REHABILITATIVE EQUIPMENT:** Does your Post have the following:

Hospital beds _____ Wheelchairs _____ Canes-crutches _____ Walkers _____

Oxygen Units _____ Ambulance or other Conveyance _____ Other _____

6. Did our Post conduct a "SERVICE NIGHT"? _____ Camp American Legion Night? _____

7. Service Clinic? _____ Other Post Activities? _____

8. No. of Military funerals conducted: _____ U.S. Government Grave Markers Ordered: _____

Give a short report of Post Activities as to Grave Registration, placement of Legion markers, etc. _____

Does your Post maintain a Grave Registration Record? _____

9. Senior Citizens Activities: _____

10. Report on visitation to sick Veterans at home and in hospitals: _____

11. Report on Post activity on Welfare Projects, such as food baskets to needy, entertainment for hospitals or any similar projects, etc.: _____

Post Funds Expended: \$ _____

12. Did your Post contribute to HOSPITAL CHRISTMAS FUND? _____ Amount: \$ _____

13. Does your Post furnish canteen books to VA hospitalized members? _____ Amount: \$ _____

14. Explain what your Post is doing to aid veterans and dependents: _____

15. Report cooperation with County Service Officer: _____

16. What did your Post do to stimulate Poppy Sales? _____

17. What does your Post do to acquaint veterans with Federal and State benefits due them as war veterans? _____

HENRY C. OAKEY & JAMES F. BURNS AWARDS CERTIFICATION FORM

Dear Post Adjutant,

In order to be eligible for the Henry C. Oakey & James F. Burns Awards, the Report Form on the previous page must filled out in its entirety.

The Post Adjutant, with the assistance of the Post Commander, has the responsibility to see that the report is properly executed and returned to Department Headquarters not later than **JUNE 1**.

In preparing the report, answer 'NO' if your Post does not engage in the particular activity. For activities the Post participates in, answer clearly and briefly. If an explanation is necessary, attach a separate sheet(s) explaining activities in detail.

The certification form provided below must be completed in order for your Post to be eligible for the Henry C. Oakey or James F. Burns Awards.

CERTIFICATION FORM

For: Henry C. Oakey & James F. Burns Awards

This certifies that the programs described on the Henry C. Oakey or James F. Burns Awards Report Form have been conducted by:

Post No: _____ Post Address: _____

City: _____ Zip Code: _____

Signature: _____

Post Americanism Chairman

Certified by: _____

Post Commander or Adjutant

Date: _____

NATIONAL AMERICANISM AWARD

Each year a **Distinguished Service Citation** is awarded to an American Legion Post in each Department that conducts the most outstanding Americanism and Community service Activity. A **Meritorious Service Citation** is awarded to the runner-up in each Department. Every Post that conducts a satisfactory Americanism Program may receive an annual **Americanism Citation**.

The information on the Consolidated Post Report (CPR) form is used in the selections of National Awards however, the committee would like to have you file a report to verify the work or elaborate on the programs that you have indicated on the Consolidated Post Report. You need to file a written report to qualify for the National Awards.

This report should be returned to headquarters by **June 1**, the same date as the CPR form is due.

Please attach this certification to your written report.

CERTIFICATION

This certifies that the attached report verifies the work indicated on the Consolidated Post Report form.

The programs were conducted by members of Post No. _____

Address: _____ City: _____ Zip: _____

Date: _____ Post Americanism Chairman: _____

Certified By: _____

(Post Commander or Adjutant)

JOSEPH R. MEEKS GUNG-HO AWARD

The Chinese translation for “*Gung-Ho*” is “working together”. A recipient of this award, whether a member of The American Legion, Legion Auxiliary or a non-member, will have exhibited an effort in working with, and towards, any or all of the objectives and principles of the Department Americanism Committee:

- Community Service Activities
 - ◆ Community Betterment
 - ◆ Health and Hospital Activities
 - ◆ Living Memorials

- Education Activities

- Flag Education Activities

- Youth Activities
 - ◆ Boy or Girl State and/or Nation
 - ◆ Oratorical
 - ◆ Scouting
 - ◆ Baseball
 - ◆ Junior Shooting Sports

- Patriotic Holiday Programs

Each District is eligible to submit the name and credentials of one nominee to the Department Adjutant’s office by **June 1**. The Adjutant will ensure that those nominee’s names and credentials are submitted for review and election to the Department Americanism sub-Committee during the review of the Post Consolidated Reports. Department Headquarters will notify the selected award recipient, as well as his/her Post and District, of the time and location of the presentation.

The award will be in the form of a plaque and a framed citation.

**Please return to:
The American Legion, Department of Wisconsin
P.O. Box 388
Portage, WI 53901**

JOSEPH R. MEEKS GUNG-HO AWARD

This certifies that the below named person did work with, and towards, the objectives and principles of the Department Americanism Committee by: (describe activities using additional pages as required)

CERTIFICATION

Nominee's Name: _____

Address: _____ City: _____ Zip: _____

Sponsored By: Post No. _____, located at _____ District No. _____

Signature: _____

District Americanism Chairman

Certified By: _____

District Commander or Adjutant

COUNTY COMMANDER OF THE YEAR AWARD

Date: _____

From: The American Legion, Department of Wisconsin District _____

To: The American Legion, Department of Wisconsin Commander

Subject: Nomination for County Commander Of The Year Award

The following named County Commander has been selected by this District to be considered as the recipient for the Department's County Commander Of The Year Award:

Name: _____

Address: _____ City: _____ Zip: _____

County Commander of _____ County, District: _____

Achievements include: _____

Percentage of this year's membership: _____ %

Conducted, and reported on, County Youth Government Day Yes No

Conducted County Council meetings Yes No

Attended (unless excused) all required District Conferences/meetings Yes No

Has supervised and ensured that each Post under his/her control has completed and submitted to Department/National Headquarters the mandated Consolidated Post Report form and all other reports as required. Yes No

Other relevant activities and/or comments (Oratorical Contest, Shooting Sports, A&G Testing, Etc.). Use additional page(s) as required.

ATTESTED

Signature: _____

District Commander

District Adjutant

Please submit by June 1 to:

**The American Legion, Department of Wisconsin
P.O. Box 388
Portage, WI 53901**

LEGISLATOR OF THE YEAR AWARD

Our Candidate: _____

Address: _____ City: _____

Zip Code: _____ County: _____ District: _____

Recommended by Post No: _____ of The American Legion located in: _____

How long has the candidate been serving as Legislator? _____

Present Position: _____

(U.S. or State Senator, State Assembly or U.S. Representative)

REQUIREMENTS: *(Use the reverse side or attach your typewritten recommendations to this application.)*

- (a) Provide a written description of legislators' efforts and contributions to Wisconsin Veterans that makes them worthy of the award.
- (b) Please provide any additional information that you would like the committee to consider.
- (c) Due at Department Headquarters not later than May 1st.

DO NOT SUBMIT ANY SCRAPBOOKS as judging will be on the above criteria

Check here if you have any additional information you would like to have the Legislative Committee review when making its decision.

Applicant must be an incumbent Legislator.

DISTRICT WINNER

(To be completed by District Commander, Adjutant and Legislative Chairman.)

The American Legion, Department of Wisconsin District _____ winner is the individual listed above under "Our Candidate".

District Adjutant

District Commander

Date

District Legislative Chairman

MARTHA MARLOWE POST CHAPLAIN AWARD

The purpose of the Martha Marlowe Post Chaplain Award is to bring RECOGNITION to our Post Chaplains.

First Place Award.....Plaque

Second Place Award Framed Citation

Third Place AwardCitation

DEADLINE DATE – JUNE 1ST

**Return the completed form to:
The American Legion, Department of Wisconsin
Attn: Martha Marlowe Award
P.O. Box 388
Portage, WI 53901**

All applicants must fill out the following questionnaire.

Chaplain's Name: _____

Address: _____

City: _____ Zip: _____

Post No: _____ District: _____ County: _____

Post Address: _____ City: _____ Zip: _____

1. List community projects participated in since the last Department Convention:

2. List Post functions participated in since the last Department Convention:

2019-2020 POST EXCELLENCE AWARD

POST NO: _____

Post Commander _____

Post Commander's Address _____

A. *Membership LAST YEAR: _____ THIS YEAR: _____

B. Youth Activities

Boy Scouts _____ Baseball _____ Oratorical _____

Boys State _____ Shooting Sports _____

Other (Specify) _____

C. Community Service

Children and youth activity _____ Assisting local families _____

Youth and Government day _____

*Community activities (parades, school activities, festivals, fairs, etc.) _____

D. Service to Troops or Veterans

Family Support programs _____ Transport vets to VA _____

Special project supporting a vet (specify) _____

Service or volunteerism at VA _____

Service of volunteerism to vets at local medical facilities _____

Other service to veterans (specify) _____

E. List any additional activities

F. *2018 Consolidate Post Report Submitted _____ Yes _____ No

G. *Registered on the National Centennial Site _____ Yes _____ No

Post Commander or Adjutant Signature _____

District Commander Signature _____

Attach supporting documents and return to your District Commander for cover letter and signature by May 1st of each year.

***Minimum Required items for award submission**

POST HONOR GUARD RECOGNITION

AWARDS FOR SQUADS

Number and type of appearances:

- | | | | |
|---|-----------------|------------|------------|
| 1. Visual Appearance | Excellent _____ | Good _____ | Fair _____ |
| 2. Uniform of dress | Excellent _____ | Good _____ | Fair _____ |
| 3. Flag etiquette | Excellent _____ | Good _____ | Fair _____ |
| 4. Ability to follow commands | Excellent _____ | Good _____ | Fair _____ |
| 5. Precision | Excellent _____ | Good _____ | Fair _____ |
| 6. Marching | Excellent _____ | Good _____ | Fair _____ |
| 7. Firing | Excellent _____ | Good _____ | Fair _____ |
| 8. Manual of arms | Excellent _____ | Good _____ | Fair _____ |
| 9. Burial honors by State of
Federal request | _____ | | |

POST AND DISTRICT

Post: _____

District: _____

NOTE: Please type or print individual member's names on the following page for certificates that will be distributed to the District Commanders at the Department Convention.

DEADLINE: Please mail both pages no later than June 1st to:

**Wisconsin American Legion
Attn: Honor Guard Award
P.O. Box 388
Portage, WI 53901**

PUBLIC RELATIONS APPRECIATION AWARD

OFFICIAL GUIDELINES

I. ESTABLISHMENT

In accepting the report of the Department Policy Committee which contained a recommendation pertaining to a request from the Department Public Relations Committee (Now the Communications Committee), the Department Executive Committee did, on July 18, 1964, at Wausau, Wisconsin, and as amended by the Public Relations and Executive Committee on October 2, 1971, on May 5, 1990, January 20, 1995 and January 24, 1997, approve the following prescribed awards:

The Department Communications Committee (formerly the Public Relations Committee) may annually recommend five (5) recipients for an American Legion "PUBLIC RELATIONS APPRECIATION AWARD" that the committee feels merit special recognition in the news media and "Certificates of Appreciation" to other deserving media.

II. MEDIA

The awards shall be confined to one (1) award each annually for the following:

OUTDOOR ADVERTISING
CABLE TELEVISION

RADIO
PRESS

TELEVISION

III. RECIPIENTS

The Press, Radio, Television, Cable Television and Outdoor Advertising merit special recognition for informing the general public on the ideals and deeds of The American Legion, therefore, an American Legion "PUBLIC RELATIONS APPRECIATION AWARD" will be presented for publicizing Wisconsin American Legion programs and activities on any one or all levels of the Department (Post, County, District, Department). "Certificates of Appreciation" shall be awarded to additional media that have participated in support of The American Legion programs throughout the year.

IV. TYPE

The awards shall be appropriately lettered plaques, with the design and lettering selected by the Department Communications Committee, and the Certificate of Appreciation to be printed at nominal cost, the same to be absorbed by the Department Communications Committee budget.

V. NOMINATIONS

Award nominations are to be sent to Department Headquarters, and can be made by any Public Relations Officer, Post Commander, County Commander or District Commander within the Department of Wisconsin.

- The individual offering a nomination for the award shall be responsible for obtaining all necessary documentation and supporting evidence.
- This documentation should indicate exactly what the nominee did or provided for the good of The American Legion. This documentation should include the dates, events or descriptions of American Legion activities that the nominees provided coverage of.

- Coverage or services provided to The American Legion for a period of a full year, for example, will receive more consideration from the judges than coverage for one event.

VI. DEADLINE – MAY 1st

All nominations, fully clarified, shall be available for perusal by the Department Communications Committee no later than **MAY 1st** for judging. The program will be based on the prior year. Judging will be done by the Department Communications Committee at the Department Spring Meetings.

VII. CONSIDERATION

All nominations received prior to the deadline date, and in proper order, shall be considered by members of the Department Communications Committee who, after reviewing same, shall cast five (5) votes by secret ballot for the selection. Only one vote cast in a specific ballot by a member of the committee present for a nominee.

VIII. PRESENTATION

Awards shall be presented at The American Legion, Department of Wisconsin Annual Department Convention to the recipients thereof, or a representative of the media selected for an award shall be invited to be present at that time. Travel, lodging and other costs will be incurred at the recipient's expense.

APPLICATION FOR THE AMERICAN LEGION, DEPARTMENT OF WISCONSIN
Emergency Medical Technician (EMT) Award

Candidate: _____

Address: _____

Recommended by Post No. _____ of The American Legion located in _____

How long has the candidate been engaged in EMT work? _____

Candidates present position: _____

PLEASE NOTE:

1. The candidate must be currently employed as an EMT, not retired.
2. The candidate must be a U.S. citizen.
3. DO NOT submit any scrapbooks, as judging will be based on the criteria required below.
4. If Requirements stated below are not followed as outlined, and proper signatures are not obtained, **applicant will be disqualified.**

REQUIREMENTS:

To assist you in the completion of your candidate's application/narrative please include the requirements listed below. The application/narrative cannot exceed eighteen (18) single-sided bond pages, on 8 ½" X 11" paper. This application form is the cover page of the application and shall not count as part of the Maximum 18 pages.

The first 6 or 7 pages should contain the candidate's service narrative/biography. The official 5"X7" Color photograph of the nominee is a must. The remaining pages may include supporting citations as well as other documentation, including press articles. Only one copy of the application/narrative should be submitted.

- Recommendation form the candidate's superior.
- Resume of the candidates EMT experience, including honors that have been bestowed upon the candidate for outstanding EMT Performance. Citations for heroism or meritorious performance of duty should be explained for the past year.
- Biography of the candidate that includes education, family, church affiliation (if applicable), as well as any fraternal or social organization(s) with which the candidate is associated.
- Describe, in your opinion, what characteristics make this candidate an outstanding EMT. **Include accomplishments outside of the candidate's EMT accomplishments. Community involvement must be noted to be considered for the award.**
- Include a copy of your candidate's state or federal certification as an EMT.
- Please list any additional information you deem pertinent which may assist the committee in arriving at a final decision regarding your candidate's application.
- The applicant's narrative/biography must include a **5"X7" (only) color photograph in full duty uniform.**
- Certified Post winners are due to the District by April 1st; certified District winners are due to the Department by May 1st.

Boxes above MUST be checked to ensure applicant/narrative is complete by chain of command (Post, County and District)

APPLICATION FOR THE AMERICAN LEGION, DEPARTMENT OF WISCONSIN
Emergency Medical Technician (EMT) Award

CERTIFICATION OF POST

This recommendation is submitted by _____ Post No. _____

The American Legion, Department of Wisconsin, located in the _____ District.

Post Adjutant

Post Commander

Date

Post Public Safety Chairman

DISTRICT WINNER

The American Legion, Department of Wisconsin, District _____ winner is the individual listed on the previous page.

District Adjutant

District Commander

Date

District Public Safety Chairman

In the event this candidate is declared the winner, will the candidate be available to appear at the Department Convention? Yes No

APPLICATION FOR THE AMERICAN LEGION, DEPARTMENT OF WISCONSIN
Outstanding Firefighter Award Program

Candidate: _____

Address: _____

Recommended by Post No. _____ of The American Legion located in _____

How long has the candidate been engaged in Firefighting? _____

Candidates present position (Firefighter, Chief, Deputy, Chief, etc.): _____

PLEASE NOTE:

1. The candidate must be an active, full-time paid or volunteer CERTIFIED FIREFIGHTER who is a member of a municipal (city) or county fire department.
2. The candidate must be a U.S. citizen.
3. DO NOT submit any scrapbooks, as judging will be based on the criteria required below.
4. If Requirements stated below are not followed as outlined, and proper signatures are not obtained, **applicant will be disqualified.**

REQUIREMENTS:

To assist you in the completion of your candidate's application/narrative please include the requirements listed below. The application/narrative cannot exceed eighteen (18) single-sided bond pages, on 8 ½" X 11" paper. This application form is the cover page of the application and shall not count as part of the Maximum 18 pages.

The first 6 or 7 pages should contain the candidate's service narrative/biography. The official 5"X7" Color photograph of the nominee is a must. The remaining pages may include supporting citations as well as other documentation, including press articles. Only one copy of the application/narrative should be submitted.

- Recommendation form the candidate's superior.
- Resume of the candidates firefighter experience, including honors that have been bestowed upon the candidate for outstanding firefighting performance. Citations for heroism or meritorious performance of duty should be explained for the past year.
- Biography of the candidate that includes education, family, church affiliation (if applicable), as well as any fraternal or social organization(s) with which the candidate is associated.
- Describe, in your opinion, what characteristics make this candidate an outstanding firefighter. **Include accomplishments outside of the candidate's firefighting accomplishments. Community involvement must be noted to be considered for the award.**
- Include a copy of your candidate's state or federal certification as a firefighter.
- Please list any additional information you deem pertinent which may assist the committee in arriving at a final decision regarding your candidate's application.
- The applicant's narrative/biography must include a **5"X7" color photograph in full duty uniform.**
- Certified Post winners are due to the District by April 1st; certified District winners are due to the Department by May 1st.

Boxes above MUST be checked to ensure applicant/narrative is complete by chain of command (Post, County and District)

CERTIFICATION OF POST

This recommendation is submitted by _____ Post No. _____

The American Legion, Department of Wisconsin, located in the _____ District.

Post Adjutant

Post Commander

Date

Post Public Safety Chairman

DISTRICT WINNER

The American Legion, Department of Wisconsin, District _____ winner is the individual listed on the previous page.

District Adjutant

District Commander

Date

District Public Safety Chairman

In the event this candidate is declared the winner, will the candidate be available to appear at the Department Convention? Yes No

APPLICATION FOR THE AMERICAN LEGION, DEPARTMENT OF WISCONSIN

Edward J. Ormsby Law and Order Award

Edward J. Ormsby, a Milwaukee Police Officer and Korean Era Veteran, was elected The American Legion, Department of Wisconsin Commander in 1970. During his term as Commander the Law & Order Award was initiated. He died in November 1973 at 43 years old. In 1974 at the 56th Annual Department Convention in Milwaukee, a resolution was passed to rename the award "The Edward J. Ormsby Law and Order Awards Program".

Candidate: _____

Address: _____

Recommended by Post No. _____ of The American Legion located in _____

Candidate's current position and rank: _____

PLEASE NOTE:

1. The candidate must be currently employed as an active duty law enforcement officer and not retired.
2. The candidate must be a U.S. citizen.
3. DO NOT submit any scrapbooks, as judging will be based on the criteria required below.
4. If Requirements stated below are not followed as outlined, and proper signatures are not obtained, **applicant will be disqualified.**

REQUIREMENTS:

To assist you in the completion of your candidate's application/narrative please include the requirements listed below. The application/narrative cannot exceed eighteen (18) single-sided bond pages, on 8 ½" X 11" paper. This application form is the cover page of the application and shall not count as part of the Maximum 18 pages.

The first 6 or 7 pages should contain the candidate's service narrative/biography. The remaining pages may include supporting citations as well as other documentation, including press articles. Only ONE copy of the application/narrative should be submitted.

- Recommendation form the candidate's superior.
- Resume of the candidates law enforcement experience, including honors that have been bestowed upon the candidate for outstanding law enforcement performance. Citations for heroism or meritorious performance of duty should be explained for the past year.
- Biography of the candidate that includes education, family, church affiliation (if applicable), as well as any fraternal or social organization(s) with which the candidate is associated.
- Describe, in your opinion, what characteristics make this candidate an outstanding law enforcement officer. **Include accomplishments outside of the candidate's law enforcement accomplishments. Community involvement must be noted to be considered for the award.**
- Include a copy of your candidate's state or federal certification as a law enforcement officer.
- Please list any additional information you deem pertinent which may assist the committee in arriving at a final decision regarding your candidate's application.
- The applicant's narrative/biography must include a **5"X7" color photograph in full duty uniform.**

- Certified Post winners are due to the District by April 1st; certified District winners are due to the Department by May 1st.

Boxes above MUST be checked to ensure applicant/narrative is complete by chain of command (Post, County and District)

CERTIFICATION OF POST

This recommendation is submitted by _____ Post No. _____

The American Legion, Department of Wisconsin, located in the _____ District.

Post Adjutant

Post Commander

Date

Post Public Safety Chairman

DISTRICT WINNER

The American Legion, Department of Wisconsin, District _____ winner is the individual listed on the previous page.

District Adjutant

District Commander

Date

District Public Safety Chairman

In the event this candidate is declared the winner, will the candidate be available to appear at the Department Convention? Yes No

APPLICATION FOR THE AMERICAN LEGION, DEPARTMENT OF WISCONSIN
Outstanding Enlisted National Guard/Reservist Award Program

Candidate: _____

Address: _____

Recommended by Post No. _____ of The American Legion located in _____

Number of years in National Guard/Reserve: _____

Present position in National Guard/Reserve: _____

PLEASE NOTE:

1. The candidate must be active part-time in the Enlisted National Guard/Reserve and not retired.
2. The candidate must be a U.S. citizen.
3. DO NOT submit any scrapbooks, as judging will be based on the criteria required below.
4. If Requirements stated below are not followed as outlined, and proper signatures are not obtained, **applicant will be disqualified.**

REQUIREMENTS:

To assist you in the completion of your candidate's application/narrative please include the requirements listed below. The application/narrative cannot exceed eighteen (18) single-sided bond pages, on 8 ½" X 11" paper.

The first 6 or 7 pages should contain the candidate's service narrative/biography. The remaining pages may include supporting citations as well as other documentation, including press articles. Only one copy of the application/narrative should be submitted.

1. Recommendation form the candidate's superior.
2. Resume of the candidates Enlisted National Guard/Reserve experience including honors that have been bestowed upon the candidate for outstanding National Guard/Reserve performance.
3. Biography of the candidate that includes education, family, church affiliation (if applicable), as well as any fraternal or social organization(s) with which the candidate is associated.
4. Describe, in your opinion, what characteristics make this candidate an outstanding Enlisted National Guard/Reservist. **Include accomplishments outside of the candidate's National Guard/Reservist accomplishments. Community involvement must be noted to be considered for the award.**
5. Include a copy of your candidate's pertinent military training and education certificates as appropriate.
6. Please list any additional information you deem pertinent which may assist the committee in arriving at a final decision regarding your candidate's application.
7. The applicant's narrative/biography must include a **5"X7" (only) color photograph in full duty uniform.**
8. Certified Post winners are due to the District by April 1st; certified District winners are due to the Department by May 1st.

CERTIFICATION OF POST

This recommendation is submitted by _____ Post No. _____

The American Legion, Department of Wisconsin, located in the _____ District.

Post Adjutant

Post Commander

Date

Post Public Safety Chairman

DISTRICT WINNER

The American Legion, Department of Wisconsin, District _____ winner is the individual listed on the previous page.

District Adjutant

District Commander

Date

District Public Safety Chairman

In the event this candidate is declared the winner, will the candidate be available to appear at the Department Convention? Yes No

