



## American Legion Auxiliary 2016-2017 National Award Cover Sheet

This cover sheet should be attached to each narrative submitted for a national award. Please fill out the information as completely and accurately as possible.

Award certificates will be completed using the information given on this sheet, so please write carefully. All awards will be mailed to the department office after national convention. Department presidents may wish to recognize award recipients by presenting them at a department function.

National committee sponsoring award: \_\_\_\_\_

Type of Award:         Department         Unit         Member

Name of the award you are applying for: \_\_\_\_\_

**Complete the following if you are applying for a department award:**

Name of department: \_\_\_\_\_

Name of department chairman: \_\_\_\_\_

Chairman's phone number: (\_\_\_\_)\_\_\_\_\_ ALA member ID#: \_\_\_\_\_

Chairman's email address: \_\_\_\_\_

**Please complete the following if you are applying for a unit award.** Be sure to give the complete name of your unit. The award certificate will be prepared using the information you include below.

Unit #: \_\_\_\_\_ Full official unit name: \_\_\_\_\_

Name of department: \_\_\_\_\_

Unit president/chairman (circle one) name: \_\_\_\_\_

Phone number: (\_\_\_\_)\_\_\_\_\_ ALA member ID#: \_\_\_\_\_

Email address: \_\_\_\_\_

**Please complete the following if you are applying for a member award.** Be sure to give the complete name of the member. The award certificate will be prepared using the information you include below.

Unit #: \_\_\_\_\_ Full official unit name: \_\_\_\_\_

Name of department: \_\_\_\_\_

Member Name: \_\_\_\_\_ ALA member ID#: \_\_\_\_\_

Nominating Member (if different from above): \_\_\_\_\_

Nominator's Phone number: (\_\_\_\_)\_\_\_\_\_

Nominator's Email address: \_\_\_\_\_

*Please see your committee Programs Action Plan to determine where to send this form.*