

The American Legion, Department of Wyoming

1320 Hugur Ave., Cheyenne, Wyoming 82001 (307) 634-3035 Fax (307) 635-7093 adjutant@wyolegion.net

https://www.facebook.com/americanlegionheadquarters

"For God and Country"

EDUCATOR OF THE YEAR

(Please type or print)	District 1	NoPost No
Name:	Phone's:	
Mailing Address		(Work)
City/S	tate/Zip	
Applicant need not be a Legionnaire.	Legionnaire? □No □Yes	If yes, Post #
Place of EmploymentNumber of	of Years	
Subject(s) being taught:		
Marital Status □single □married Spouse's name:		
Children's name and ages:		
Schools attended (Civilian/Military: List with Degree,	Academic, Honors, etc.)	
Briefly describe community involvement (Civic, Frate	rnal, Religious Organizations and	l Affiliations):
Briefly describe what is done to promote Americanism	n by the Applicant	
Summarize the reason why you believe that your nommore space is needed)	inee should be selected: (Use reve	rse or additional sheets if
Signature of Post Official		
Title Date		

INSTRUCTIONS: Please submit this form to your District Convention. The nominees judged first in each District will be submitted to the Department for final judging.