

Approved via email to all District Officers and DEC January 2021

GUIDELINES FOR WYOMING DEPARTMENT ANNUAL AWARDS

The following guidelines are to be used in the selection of the nominee for each of subsequent awards:

- (1) The Post will select only one (1) nominee for each award. The Post should then work with the nominee in gathering supportive material to be presented at the District Convention. The Post will forward their nomination to their respective District for consideration at the Spring Convention.
- (2) At each District Spring Convention all nominations will be reviewed and one (1) winner in each category will be selected to represent their respective District in the Department competition.
- (3) The winners of the six (6) District competitions will be judged prior to the Department Convention where one (1) winner in each category will be selected. It is the responsibility of the District commanders to forward their respective nominations to the Department Office Headquarters no later than two weeks following close of the last District Convention. Nominations received after the deadline will NOT be considered. The winner or sponsoring post will receive a traveling trophy, which will be in their possession for the year. An individual trophy or plaque will also be provided for those specific categories.
- (4) It shall be the responsibility of the sponsoring post and/or recipient of the award to return the traveling trophy to the Department Headquarters at the District Convention
- (5) Department award winners will be invited to the Annual Department Convention for a presentation of their respective award. It is the responsibility of the sponsoring Post to cover costs.
- (6) Committee members for Department Awards will be confirmed at the Annual Mid-Winter Conference. These members will review nominations following the District Conventions and report results to the Department office Headquarters NLT 15 May of the current year.
- (7) Respective District Commanders will be notified of the winners of specific awards and will be responsible for notifying those winners.

POST COMMANDER/POST ADJUTANT OF THE YEAR

IAW DEC meeting 12 September 2014, District Commanders will track the activities in their respective districts. Judging of the Outstanding Post Commander and the Outstanding Post Adjutant will be accomplished through a narrative report on the activities throughout the current year. The District Commanders will make their selection and forward it to the Department office Headquarters for final evaluation. Individual Posts will not submit a nomination for this category. Approved via email to all District Officers and DEC October 2014

LEGIONNAIRE OF THE YEAR

These candidates should be selected on what they have accomplished over the past year, and not what they have done during their careers, taking into consideration what they have done for The American Legion at the Post, District or Department levels. This award is not be judged on membership alone, but also on their involvement in American Legion programs; such as Boys State, Oratorical, Baseball, Boy Scouts, Community Service, work at the VA etc. The Department Commander will appoint a committee to make the selection.

MEMBERSHIP WORKER OF THE YEAR

These candidates should be selected primarily on membership, taking into consideration the number of new members acquire, the total number of members acquired, the size of the Post, the amount of effort put forth working membership and the number of eligible veterans in the area. This is more than just gaining new member numbers. The Department 1st Vice Commander and members appointed by the Department Commander will make the selection. The winner will be awarded a Department Champion Jacket with their name embroidered on it.

OUTSTANDING CLUB MANAGERS/BARTENDERS

These candidates should be selected based on their annual performance of carrying out their duties and responsibilities as prescribed by the post's operating procedures and how they contribute to the Legion Family as a whole. The narrative from the individual post should clearly state their performance and how it contributed to the overall success of the post over the past year. Managers and bartenders are encouraged to be a member of the Legion Family if eligible. The Department Commander will appoint a committee to make the selection.

CITIZEN SOLDIER OF THE YEAR'

These candidates should be selected on what they have accomplished over the past year and not what they have done during their careers. This should be based on community service or what they have accomplished as both citizens and as soldiers. Each Post is urged to give as much supportive information as possible on their nominee, letter from the Unit Commander, letter(s) from other superiors, etc. The more information made available supporting your nominee, the better their chance of winning. A full-length photo in full uniform is optional, but would be of assistance to the selection committees. The Department Commander will appoint a committee to make the selection.

LAWMAN OF THE YEAR

These candidates should be selected by what they have accomplished over the past year and not what they have done during their careers. This should be based on their duties and responsibilities to the community. Each Post is urged to give as much supportive information as possible on their nominee, letter from the Police Chief or Sheriff, letter(s) from other superiors, etc. The Department Commander will appoint a committee to make the selection.

FIREMAN OF THE YEAR Approved via email to all District Officers and DEC October 2014

These candidates should be selected by what they have accomplished over the past year and not what they have done during their careers. This should be based on their duties and responsibilities to the community. Each Post is urged to give as much supportive information as possible on their nominee, letter from the Fire Chief, letter(s) from other superiors, etc. The Department Commander will appoint a committee to make the selection.

EDUCATOR OF THE YEAR

These candidates should be selected by what they have accomplished over the past year and not what they have done during their careers. This should be based on their duties and responsibilities to the community. Each Post is urged to give as much supportive information as possible on their nominee, letter from the Principal or Superintendent, letter(s) from other superiors, etc. The Department Commander will appoint a committee to make the selection.

EMERGENCY MEDICAL TECHNICIAN OF THE YEAR

These candidates should be selected by what they have accomplished over the past year and not what they have done during their careers. This should be based on their duties and responsibilities to the community. Each Post is urged to give as much supportive information as possible on their nominee, letter from their company, letter(s) from other superiors, etc. The Department Commander will appoint a committee to make the selection.

FOUR CHAPLAINS FOR GOD AND COUNTRY

Award to a Post-level Chaplain for service and duties beyond reproach. Judged by the Department Chaplain, Department Commander and the Department 2nd Vice-Commander.

HEALTH CARE WORKER OF THE YEAR

Nominees may be involved in any of the following Health Care fields including, but not limited to: Medical-Nursing Assistants, LPNs, RNs, Nurse Practitioners, Therapists, Medical Technicians (med, lab, occupational, physical, respiratory, etc.), PAs, Orderlies and Aids, and Physicians.

These candidates should be selected by what they have accomplished over the past year and not what they have done during their careers. This should be based on their duties and responsibilities to the community. Each Post is urged to give as much supportive information as possible on their nominee, letter from their company, letter(s) from other superiors, etc. The Department Commander will appoint a committee to make the selection

The following department awards are judged through the information submitted on the Post Activities Report and do not go through the District level selection process.

LLOYD SEAMAN ATHLETIC TROPHY

Each post may submit a Post Athletic Report for this award prior to their respective Spring Convention. The District Commanders will make the selection at their Spring Convention and forward to the Department for final evaluation. The Department Athletic Chairman and Committee Members will make the selection after reviewing the reports and report the results to the Department Office Headquarters NLT 15 May of the current year.

AMERICANISM PLAQUE

The Department Americanism Chairman and Committee Members will make the selection after reviewing the reports.

COMMUNITY SERVICE – LARGE POST

The Department Community Service Chairman and Committee Members will make the selection after reviewing the reports. Posts in Division 3, 4, & 5 compete for this award.
Approved via email to all District Officers and DEC October 2014

COMMUNITY SERVICE – SMALL POST

The Department Community Service Chairman and Committee Members will make the selection after reviewing the reports. Posts in Division 1 & 2 compete for this award.

DISTRICT COMMANDER OF THE YEAR

All six Commanders are judged through a point system with the Commander earning the most points winning the award. The Department Adjutant does the tracking. A copy of the award point procedure is in the District Commanders guidebook or available at the headquarters office.

OUTSTANDING POST SERVICE OFFICER

Each post may submit their service officer for this award. The selection should be based on their annual performance of carrying out their duties and responsibilities as prescribed by the post's Constitution and By-law, the Officers Manual and the Post Service Officers Manual. The narrative from the individual post should clearly state their performance and how it contributed to the aid the veterans and their families received in your community over the past year. The Department Service Officer will make the final selection. Forms must be received at the Department Office NLT than 1 May of the current year.

Note: Any post may sponsor a traveling trophy or plaque. In the past, once the trophy filled up it was returned to the sponsoring post for display. Unfortunately, there are no records to show who sponsored which one unless the name was on the plaque or trophy. If anyone has any information or remember their posts sponsoring a trophy or plaque please let the department headquarters know. In 1997 the Department began to cycle out the trophies and replace them with plaques. If you or your post would like to sponsor a plaque please contact the department headquarters.



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"

OUTSTANDING POST COMMANDER AWARD

The Post Commander's duties are broad and difficult. The commander must lead and navigate the post with the support of post members and officers along with District and Department officers. The commander is charged with the overall operation of the post and is responsible to its members for legal, moral and honorable processes. This form must be submitted by the District Commander to Department for scoring NLT 15 May. The award criteria are the same as for the Post Adjutant's Award. Please fill both out at the same time.

Post Commander's Name _____

Post No: _____

District No: _____

Years as Cmdr.: _____

Commander at attendance for Department meetings:

___ Last Year's Department Convention

___ Fall Workshop

___ Mid-Winter Conference

___ District Convention

Does the Post have a current Constitution & By-Laws? Yes: ___ No: ___

Is the Post incorporated? Yes: ___ No: ___

Does the Post have articles of incorporation? Yes: ___ No: ___

Is every officer who handles funds bonded? Yes: ___ No: ___

How does the Commander assist and coordinate the executive committee and post sub-committees:

How does the Commander plan yearly post operations and promote the Post and The American Legion:

How does the Commander keep old programs running and what specifically does he/she do to ensure programs are effective:

How does the Commander encourage members to actively participate in civic/community affairs:

Detail below any outstanding efforts of the post commander in consideration of this award:

District Commanders:

You will submit only one nominee from your District for the Department Award.

District Commander's or Adjutant's Signature

Date



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OUTSTANDING POST ADJUTANT AWARD

The adjutant's duties are largely administrative. The adjutant runs the operations and keeps the post on an even keel and is the personal point of contact for the Post. He/she must meet deadlines, complete required actions, and at the same time maintain honest and willingness to the Post. This form must be submitted by the District Commander to Department for scoring NLT 15 May. The award criteria are the same as for the Post Commanders Award. Please fill both out at the same time.

Post Adjutant's Name _____

Post No: _____

District No: _____

Years as Adjutant: _____

Adjutant at attendance for Department meetings:

Last Year's Department Convention

Fall Workshop

Mid-Winter Conference

District Convention

Department Required Reports

Consolidated Post Report Completed and at Dept. HQ

Annual Post Data Forms Completed and into Dept. by 1 April

Post Officer Certification

Does the Adjutant transmit membership reports accurately and timely? Yes: No:

How does the Adjutant assist new officers and committees?

What specific activities/programs has he/she supported to promote the Post and The American Legion:

Does the Post recognize milestones in membership and how is this accomplished?

Ways and Means is a primary concern of the Post Adjutant. How has he/she contributed to this at the post:

Detail below any outstanding efforts of the post adjutant in consideration of this award:

District Commanders:

You will submit only one nominee from your District for this Department Award.

District Commander's or Adjutant 's Signature

Date



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LEGIONNAIRE OF THE YEAR

(Please type or print)

District No: _____

Post No: _____

Name: _____ Phone #'s: _____
(Home) (Work)

Mailing Address: _____ Age: _____
(Include Street or P. O. Box, Town, State and Zip)

Occupation/Profession: _____ Title/Position _____

Marital Status: Single Married - Spouse's name: _____

If applicable, please list Children: (Names and ages):

Member of The American Legion: _____ years. Office or committees held (name and year held)

Number of Legion members secured: New _____ Renewals _____ Reinstatements _____

Branch of Service: _____ Rank _____ Enlistment Date _____ Discharge Date: _____

Schools attended (list together with Degrees, Academic Honors, etc.)

Civic, Fraternal, Religious organizations and affiliations: (include office titles, etc.) _____

Summarize the reason why you believe that your nominee should be selected.

(Use reverse or additional sheets if more space is needed)

Post Officer's Signature

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.



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OUTSTANDING MEMBERSHIP WORKER

(Please type or print)

District No. _____

Post No. _____

Name: _____ Phone #'s: _____
(Home) (Work)

Mailing Address: _____ Age: _____
(include Street or P. O. Box, Town, State and Zip)

Occupation/Profession: _____ Title/Position _____

Marital Status: Single Married - Spouse's name: _____

If applicable, please list Children: (Names and ages):

Member of The American Legion _____ years. Office or committees held (name and year held)

Number of Legion members secured: New ____ Renewals ____ Reinstatements _____

Summarize the reason why you believe that your nominee should be selected. How has the Legionnaire promoted membership in your post, district and Department:

(Use reverse or additional sheets if more space is needed)

Current Post Membership Goal: _____

Current Post Membership: _____

Last year's Post Membership: _____

Post Officer's Signature

Title

Date

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OUTSTANDING CLUB MANAGER/BARTENDER OF YEAR

(Please type or print)

District No: _____ Post No: _____

Name: _____ Phone #'s: _____
(Home) (Work)

Mailing Address: _____
(Include Street or P. O. Box, Town, State and Zip)

Bartender: Club Manager:

Other Occupation/Profession: _____ Position or Title: _____

Marital Status: Single Married - Spouse's name: _____
If applicable, please list Children: (Names and ages) _____

Member of The American Legion/Legion Auxiliary for _____ years. List office or committees held:

Number of Legion members secured: New ____ Renewals ____ Reinstatements _____

Summarize the reason why you believe that your nominee should be selected and how do they promote the legion in your post home.

(Use reverse or additional sheets if more space is needed)

Post Officer's Signature

Title

Date

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



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THE CITIZEN SOLDIER OF THE YEAR AWARD

With the adoption of Resolution No. 3 at the June 1986 Department Convention held in Lander, Wyoming, the Department will be selecting the Citizen Soldier of the Year annually whether they be National Guard or Reserve, male or female.

The rules governing the selection are as follows:

- (1) Each Post is encouraged to contact their local units, National Guard and Reserve, to seek their cooperation in obtaining the name and supporting information for a nominee.
- (2) The Post will then select one (1) nominee from the name(s) submitted. The Post should then work with the nominee in gathering supportive material to be presented at the District Convention.
- (3) At each District Spring Convention all nominations will be reviewed and one (1) winner will be selected to represent the District in the Department competition. All materials on the winner will then be forwarded to the Department Adjutant.
- (4) The winners of the six (6) District competitions will be judged at the Department Convention or at an earlier time set by the Department Commander, where one (1) winner will be selected. The selectee and Unit Commander will be notified and the selectee and spouse will be invited to attend the Department Convention Banquet, as guests of the Department, to receive their trophy which can be taken back to their unit. If the selectee is not a member of the American Legion, Department will pay their dues to the Post of their choosing for the upcoming membership year.
- (5) Each Post is urged to give as much supportive information as possible on their nominee, letter from the Unit Commander, letter(s) from other superiors, etc. The more information made available supporting your nominee, the better their chance of winning. A full-length photo in full uniform is optional, but would be of assistance to the selection committees.

Note: It has been suggested that this award be made to enlisted personnel only, since the officer grades receive recognition from other sources.



THE AMERICAN LEGION
DEPARTMENT OF WYOMING

District No. _____ Post No. _____

NOMINEE FOR CITIZEN SOLDIER

Name _____
(First) (Middle Initial) (Last)

Home Phone _____ Work Phone _____

Mailing Address _____

Occupation/Profession _____ Military Grade _____

Marital Status (Spouses name) _____

Children (name & age) _____

Present Branch of Service _____ Name of Unit Commander _____

Unit Designation _____

Unit Address _____

Present Duty Position _____

Active Duty? Yes No Dates of active duty _____ to _____

Dates of reserve component service _____ to _____

Decorations/Awards (Federal/State)

Schools (Civilian/Military: List with Degree, Academic, Honors, etc.)

Civic, Fraternal, Religious Organizations and Affiliations

Summarize the reason why you believe that your nominee should be selected. (Attach additional sheets if more space needed)

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.



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"For God and Country"

LAW ENFORCEMENT OFFICER OF THE YEAR

Nominee for outstanding service to the community through carrying out the duties as a police officer (sheriff, highway patrolman, etc.), in a manner which reflects credit upon all law enforcement and for dedication to their profession above and beyond the call of duty.

(Please type or print)

District No: _____

Post No: _____

Name: _____ Phone #'s: _____
(Home) (Work)

Mailing Address: _____ Age: _____
(include Street or P. O. Box, Town, State and Zip)

Position or Title: _____ Number of years on Force: _____

Marital Status: Single Married - Spouse's name: _____

If applicable, please list Children: (Names and ages)

Summarize the reason why you believe that your nominee should be selected.

(Use reverse or additional sheets if more space is needed)

Post Officer's Signature

Title

Date



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"For God and Country"

FIREFIGHTER OF THE YEAR

Nominee for outstanding service to the community through carrying out the duties as a Firefighter, in a manner which reflects credit upon all Firefighters and for dedication to their profession above and beyond the call of duty.

(Please type or print)

District No: _____ Post No: _____

Name: _____ Phone #'s: _____
(Home) (Work)

Mailing Address: _____
(include Street or P. O. Box, Town, State and Zip)

Position or Title: _____ Number of years on Force: _____

Marital Status: Single Married - Spouse's name: _____

If applicable, please list Children: (Names and ages)

Summarize the reason why you believe that your nominee should be selected.

(Use reverse or additional sheets if more space is needed)

Post Officer's Signature

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.



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EDUCATOR OF THE YEAR

(Please type or print)

District No. _____ Post No. _____

Name: _____ Phone's: _____

(Home) (Work)

Mailing Address _____

City/State/Zip

Applicant need not be a Legionnaire.

Legionnaire? No Yes

If yes, Post # _____

Place of Employment _____ Number 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, Fraternal, Religious Organizations and Affiliations):

Briefly describe what is done to promote Americanism by the Applicant

Summarize the reason why you believe that your nominee should be selected: (Use reverse or additional sheets if more space is needed)

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.



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EMERGENCY MEDICAL TECHNICIAN OF THE YEAR

Nominee for outstanding service to the community through carrying out the duties as an EMT, in a manner which reflects credit upon all EMT's and for dedication to their profession above and beyond the call of duty.

(Please type or print)

District No: _____ Post No: _____

Name: _____ Phone #'s: _____
(Home) (Work)

Mailing Address: _____ Age: _____
(include Street or P. O. Box, Town, State and Zip)

Position or Title: _____ Number of years as an EMT: _____

Marital Status: Single Married - Spouse's name: _____

If applicable, please list Children: (Names and ages)

Summarize the reason why you believe that your nominee should be selected.

(Use reverse or additional sheets if more space is needed)

Post Officer's Signature

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.



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HEALTH CARE WORKER OF THE YEAR

(Please type or print)

District No. _____

Post No. _____

Name: _____ Phone #'s: _____
(Home) (Work)

Mailing Address _____ City/State/Zip _____

Is the nominee a member of the American Legion, Sons or American Legion Auxiliary: No Yes. If yes, Post # _____

Nominee need not be a Legionnaire, Son or Auxiliary member.

Is nominee currently working in the Medical field? Y/N _____ Position: _____

Employer: _____

Briefly describe current duties and responsibilities: _____

Briefly describe community involvement (Civic, Fraternal, Religious Organizations and Affiliations): _____

Briefly describe what is done to promote health and welfare within the community: _____

Summarize the reason why you believe that your nominee should be selected:

(Use reverse or additional sheets if more space is needed)

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.



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"For God and Country"

COMMANDER'S YOUTH SERVICE AWARD

(Please type or print)

District No. _____

Post No. _____

Name: _____ Phone #'s: _____

(Home)

(Work)

Mailing Address _____ City/State/Zip _____

Is the nominee a member of Sons of the American Legion or American Legion Auxiliary: No Yes. If yes, Post # _____

Nominee need not be a Legionnaire, Son or Auxiliary member.

Age _____ Is nominee currently enrolled in school Y/N _____ Grade level: _____

Scholastic and extra-curricular activities (Civic, Military, Academic, Honors, GPA, etc.)

Briefly describe community involvement (Civic, Fraternal, Religious Organizations and Affiliations):

Briefly describe what is done to promote Americanism by the Nominee: _____

Summarize the reason why you believe that your nominee should be selected:

(Use reverse or additional sheets if more space is needed)

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.



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LLOYD SEAMAN ATHLETIC AWARD

*The Department Athletic Committee will determine the Lloyd Seaman Athletic Award recipient each year prior to the Department Convention. The Annual Post Activities Report will be used in determining award points. This award includes all sports activities sponsored or supported by the Post; both youth sports and adult. Deadline is **June 1st**.*

(Please print or type)

Post Name & No. _____ Date: _____

Participation: Legion Baseball

Number of teams sponsored _____

Number of players participating _____

Number of games played _____

Tournament hosted _____

Tournaments participated in _____

Won/Lost record _____

Number of Legionnaires participating _____

Jr. Shooting Sports:

Number sponsored: ____

Number of Legionnaires participating: ____

High School Rodeo:

Number of Contestants: ____

Number of Legionnaires participating: ____

Award sponsored? ____

Program cost: \$ _____

Other Adult athletic activities:

Bowling teams: ____ # Legionnaires: ____

Tennis Teams: ____ # Legionnaires: ____

Horseshoe Teams: ____ # Legionnaires: ____

Basketball Teams: ____ # Legionnaires: ____

Softball Teams: ____ # Legionnaires: ____

Pool/Billiard Teams: ____ # Legionnaires: ____

Dart Teams: ____ # Legionnaires: ____

Swimming activities:

(Use reverse side or attach additional sheets if more space needed)

Post Officer Signature _____



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adjutant@wyolegion.net

WYO Legion.org

"For God and Country"

OUTSTANDING POST SERVICE OFFICER

(Please type of print)

District No. _____

Post No. _____

Name: _____ Phone #'s: _____

(Home)

(Work)

Mailing Address _____ City/State/Zip _____

Age _____ Place of Employment _____ Number of Years _____

Marital Status single married. Spouse's name: _____

Children's name and ages: _____

Schools attended (Civilian/Military: List with Degree, Academic, Honors, etc.)

Provide dates of Service Officer Schools attended (Sessions providing up-to-date information to effectively assist veterans and dependents are conducted by the Dept. Service Officer):

Number of official claims submitted to Department Service Officer for current year. _____

Quality of claims submitted-up-to-date, well prepared, inclusive information (Please circle one)

Excellent

Good

Poor

Number of visitations (hospitals, nursing homes, private homes, etc.) _____

Number of transit assistance (veterans' organizations, service clubs, food, gas. Money, or other services provided) _____

Briefly describe additional attributes and services provided by the Post Service Officer:

(Use reverse or additional sheets if more space is needed)

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.



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adjutant@wolegion.net

<http://wolegion.org/>

“For God and Country”

Individual Four Chaplain Memorial Award

Nominee for performance of service and duties to the post and community beyond reproach through carrying out the duties as a Post Chaplain, in a manner which reflects credit upon all Chaplains and in the spirit of the Four Chaplains Memorial.

(Please type or print)

District No: _____ Post No: _____

Name: _____ Phone # 's: _____
(Home) (Work)

Mailing Address: _____
(include Street or P. O. Box, Town, State and Zip)

Years of Legion Membership: _____ Years serving as Post Chaplain: _____

Other TAL Chaplain positions held:

Complete “Service to God and Country” Activities report (Pages 2-3)

Summarize the reason why you believe that your Chaplain should be selected.

Summarize community involvement (civic, fraternal, religious organizations and affiliations):

(Use reverse or additional sheets if required)

Post Officer's Signature

Title

Date

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

Guidance for determining
SERVICE TO GOD AND COUNTRY INDIVIDUAL
FOUR CHAPLAINS MEMORIAL AWARD

1. This is an individual Award honoring the most active Chaplain attending to the post and associated community's spiritual needs.
2. The FOUR CHAPLAINS MEMORIAL AWARD recognizes a Post-level Chaplain for service and duties beyond reproach. Department of Wyoming will recognize the most outstanding activities and record of achievement in the "Service to God and Country" program for the given year. All documents and recommendations must be submitted to the Department Adjutant 30 days prior to Department Convention.
3. Evidence of the activities and achievements should be presented in the form of programs, clippings, pictures, scrapbooks, etc.
 - a. A completed "Service to God and Country" report signed by the Post Commander is considered in determining the winner of this award.
 - b. Special programs conducted in cooperation with National, Department and District activities supporting your local community will also be considered.
 - c. Any American Legion sponsored spiritually focused event encouraging Veterans, their families or Active Duty service persons and their families that are in the spirit of The Four Chaplains self-sacrificial actions.
4. Award judges:
 - a. The Post will submit their Individual Four Chaplain Memorial Award form to their District Convention.
 - b. Nominees chosen as district awardees will be submitted to Department Adjutant for final judging.
 - c. Department Chaplain will chair the judge's panel. FOUR CHAPLAIN MEMORIAL AWARD judges are the Department Commander, Second Vice Commander and Chaplain.
5. The award will be presented at the Annual Department Convention of the Department of Wyoming by the Department Chaplain, or their designee.

1. Did the Chaplain host a Department Four Chaplains program? Y. N.
2. Did the Chaplain host a District Four Chaplains program? Y. N.
3. Did the Chaplain host a Post Four Chaplains program? Y. N.
4. Does your post display a poster or a display recognizing the Four Chaplains? Y. N.
5. Did the Post Chaplain/Members visit sick or hospitalized members? Y. N.
6. Did the Post Chaplain/Members report on sick or hospitalized members at Post Meetings? Y. N.
7. We're get well cards and condolences cards sent to Post members and/or families? Y. N.
8. We're veterans funeral services held for all deceased members of the Post? Y. N.
9. Did the Chaplain assist other veterans organizations with funeral services? Y. N.
10. Did the Chaplain present Memorial Bibles? Y. N.
11. Did the Chaplain conduct a Department Post Everlasting Service? Y. N.
12. Did the Chaplain conduct a District Post Everlasting Service? Y. N.
13. Did the Chaplain conduct a Post Everlasting Service? Y. N.
14. Did the Chaplain hold special services for: (Each check is 2 Pts)

Lincoln's Birthday _____.	Constitution Day _____.
Washington's Birthday _____.	Citizenship Day _____.
Memorial Day _____.	American Education Week _____.
Flag Day _____.	Veterans Day _____.
Independence Day _____.	Thanksgiving _____.
Christmas Day _____.	
15. Has the Chaplain been active spiritually supporting the: (Each check is 2 Pts)

Sons of the American Legion _____.
Wyoming American Legion Riders of the United States _____.
Ladies Auxiliary _____.
16. Did the Chaplain present U. S. Flags to any Churches? _____.
17. Have local religious leaders been invited to speak at post meetings? Y. N.
18. Are local churches furnished with "Service to God and Country" programs. Y. N.
19. Are materials on the Post property to encourage Church/Synagogue/Temple attendance? Y. N.
20. Has your Chaplain regularly conducted prayer of thanks before meals? Y. N.

21. Does your Post recognize and encourage the religious foundations of our nation in the local community? Y. N.

22. Did the Chaplain attend Department, District and Post meetings?

Department Conv. FallWorkshop Mid-Winter Conf. District Conv.



The American Legion, Department of Wyoming

1320 Hugur Ave., Cheyenne, Wyoming 82001

(307) 634-3035 Fax (307) 635-7093

adjutant@wyolegion.net

WYO Legion.org

"For God and Country"

OUTSTANDING POST SERVICE OFFICER

(Please type of print)

District No. _____

Post No. _____

Name: _____ Phone #'s: _____

(Home)

(Work)

Mailing Address _____ City/State/Zip _____

Age _____ Place of Employment _____ Number of Years _____

Marital Status single married. Spouse's name: _____

Children's name and ages: _____

Schools attended (Civilian/Military: List with Degree, Academic, Honors, etc.)

Provide dates of Service Officer Schools attended (Sessions providing up-to-date information to effectively assist veterans and dependents are conducted by the Dept. Service Officer):

Number of official claims submitted to Department Service Officer for current year. _____

Quality of claims submitted-up-to-date, well prepared, inclusive information (Please circle one)

Excellent

Good

Poor

Number of visitations (hospitals, nursing homes, private homes, etc.). _____

Number of transit assistance (veterans' organizations, service clubs, food, gas, money, or other services provided) _____

Briefly describe additional attributes and services provided by the Post Service Officer:

(Use reverse or additional sheets if more space is needed)

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.