



The American Legion, Department of Wyoming

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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.