



# Detachment of Washington Volunteer of the Year Award

\_\_\_\_\_ (Date)

## Section I – General Data

Nominee: \_\_\_\_\_  
(Full name)

\_\_\_\_\_ (Address) \_\_\_\_\_ (City) \_\_\_\_\_ (Zip)

## Section II – Total Hours

Number of Hours Volunteered: \_\_\_\_\_

## Section III – Remarks

Volunteer Activities and General Remarks:

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## Section IV – Certification

Submitted by: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Attested by: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

(over)

## WHAT TO DO WHEN FILLING OUT THIS FORM

### Section I – General Data

**General** Squadrons should submit their nominee, if available, to the S A L Senior Advisor.

### Section II – Total Hours

**Period** The period of this volunteer award should be from Detachment Convention to Detachment Convention.

### Section III – Remarks

**Activities**  
**General Remarks** This section should be completed in detail as to the types of volunteer activities (what the nominee actually did) that were performed. If additional space is required, please use additional paper stapled to the original form.

### Section IV – Certification

**Certification** The report can be submitted by any SAL or Legion Family member who belongs to the same Squadron or Post. The report should be “Attested” to by the Squadron or Post Commander.

**MAIL TO: Senior Advisor:**  
Randy Holloway  
2164 Rd 18 N.W. Ephrata WA 98823

Application need to be mailed to the Senior Advisor by May 15<sup>th</sup>.