SONS OF THE AMERICAN LEGION
MARVIN P. NAY
VETERANS EMPLOYMENT AND EDUCATION
OUTSTANDING CONTRIBUTOR
AWARD CRITERIA

- Be a member in good standing (current membership dues paid).
- The nominee shall be engaged in the fundraising, distribution of funds or goods, and/or volunteering at an event deemed beneficial to veterans' employment and/or education (to include homelessness).
- At least one picture of the nominee at the event must be submitted with the nomination form.
- The nominee must be wearing identifiable SAL clothing (cover, cap, shirt, jacket or combination).

AWARD CUTOFF:
Nominations are due at National Headquarters before the Veterans Employment and Education Commission meeting at the Spring NEC meetings each May. The commission will select the recipient during this meeting.

Presentation: The award will be presented at the National Convention to either the recipient or a Detachment representative.

- A Detachment may submit more than one (1) nominee for consideration.
- A Sons of The American Legion member may nominate himself.
- The nomination form must be signed by the Nominator and attested by a Squadron officer.

Send the completed **Award Form** and **Photo(s)** [if applicable] by one of the below methods:

MAIL: The American Legion
Attn: SAL Awards
700 N. Pennsylvania Street
Indianapolis, IN 46204

QUESTIONS: 317-630-1205

EMAIL: SALawards@legion.org (**Write in Subject Line**: "Marvin P. Nay Award Nomination")

For more information visit the national Sons of The American Legion website at
www.legion.org/about/american-legion-family/sons-of-the-american-legion/publications-and-forms

SONS OF THE AMERICAN LEGION
MARVIN P. NAY
VETERANS EMPLOYMENT AND EDUCATION
OUTSTANDING CONTRIBUTOR AWARD
NOMINATION FORM

Nominee Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone No: _____ Email: _____

Squadron Name: _____ Squadron No. _____

Detachment: _____ Cover Size: _____ Member ID#: _____

Contribution Details

How many events: _____ Total volunteer hours: _____ Total money raised/donated: _____

Brief description of details (who, what, when, where) include pictures:

_____

_____

_____

_____

_____

Nominator: _____ Date: _____
Type your First and Last Name to serve as your digital signature — Format: mm/dd/yyyy / select date by clicking inside above box

Officer Name: _____ Date: _____
Type your First and Last Name to serve as your digital signature — Format: mm/dd/yyyy / select date by clicking inside above box

Officer Title: _____

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