CHAPEL AWARD NOMINATION FORM

Name of Nominee:

Type of Award Requested: Legion of Honor of the Chapel of Four Chaplains

Address:

Date of Birth: M/D/Y (Year Preferred but not required)

Phone Number:

Email:

| Service hours | | Expenses | | Mileage | | Years |
|---------------|---|---------|---|--------|---|

SUMMARY OF ACTION

Name of Nominator:  Signature:

TITLE:

Phone Number:  Email:

Enclosure (1)
# CHAPEL AWARD NOMINATION FORM

<table>
<thead>
<tr>
<th><strong>Name of Nominee:</strong></th>
<th>Please type in official name. Please do not put Bill for William, Bob for Robert, Kate for Cathy, etc.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Type of Award Requested:</strong></td>
<td>Legion of Honor of the Chapel of Four Chaplains</td>
</tr>
<tr>
<td><strong>Address:</strong></td>
<td>Type in address of nominee</td>
</tr>
<tr>
<td><strong>Date of Birth:</strong></td>
<td>Type in date of birth for nominee (at least provide day &amp; month)</td>
</tr>
<tr>
<td><strong>Phone Number:</strong></td>
<td>Type in phone number for nominee</td>
</tr>
<tr>
<td><strong>Email:</strong></td>
<td>Type in the email address of the nominee if they have one</td>
</tr>
<tr>
<td><strong>Service hours:</strong></td>
<td>Type in estimated hours of service for period covered, i.e. <strong>9,585 hrs</strong></td>
</tr>
<tr>
<td><strong>Expenses:</strong></td>
<td>Type in out-of-pocket expenses donated by the awardee, i.e. <strong>$1,760</strong></td>
</tr>
<tr>
<td><strong>Mileage:</strong></td>
<td>Type in approximate mileage driven, i.e. <strong>1,500 miles</strong></td>
</tr>
<tr>
<td><strong>Years:</strong></td>
<td>Type in approximate years of service covered by this nomination, i.e. <strong>10 yrs</strong></td>
</tr>
<tr>
<td><strong>Summary of Action:</strong></td>
<td><em>Type in bullet format any actions that support the nomination.</em> (Use another sheet of paper if you need more space for your summary of action)</td>
</tr>
</tbody>
</table>
| **Examples:** | • **Name** is a devout Christian who has dedicated his/her life in serving church and others. Then explain in detail what service they did.  
• **Name** has performed X number of hours of community service to veterans, youth or other activities. Then explain in detail what service they did.  
• **Name** tiredly works at the local VA Clinic/Hospital in support of patients. Then explain in detail what service they did.  
• **Name** has donated funds out of pocket in support of **organization**. Then explain in detail what organization, how much money and what the money was used for.  
• **Name** unselfishly gives of his/her time in support of **organization**. Then explain what organization and explain in detail what service they did. |
| **Name of Nominator:** | Type in name of Nominator then place your signature |
| **TITLE:** | Type in the Title of the nominator, for example;  
• Commandant  
• District Vice Commandant  
• Chaplain  
• Member  
• Other |
| **Phone Number:** | Type in phone number of the nominator |
| **Email:** | Type in the email of the nominator |
From: Chairman, Chapel of Four Chaplains, Department of Florida,
Marine Corps League

To: DISTRIBUTION LIST

SUBJ: CHAPEL OF FOUR CHAPLAINS LEGION OF HONOR NOMINATION

Ref: (a) http://www.fourchaplains.org/legion-of-honor-programs/

ENCL: (1) Chapel Award Nomination form

1. This letter outlines the process for nominating a Marine Corps League Member in good standing for the Chapel of Four Chaplains Legion of Honor Award as prescribed in reference (a) and will be recognized at either the DOF MCL Spring or Fall Conference or at the DOF MCL Convention.

2. **Background:** The Legion of Honor Award programs publicly recognizes and honors outstanding members of society whose lives model the giving spirit and unconditional service to community, nation, and humanity without regard to race, religion, or creed exemplified so dramatically by the Four Chaplains. To be considered for any of the five awards, the selfless and transformative achievement must be above, and beyond that of a professional resume or organizational position. *For example, a Chaplain performing acts, which are his or her duties, may disqualify the nomination.*

   (NOTE) Any member of the Legion of Honor Society may submit another person in for an award and conduct an appropriate ceremony at their Detachment. This policy is strictly to nominate a deserving MCL member of citizen who will be recognized at one of the DOF MCL conferences or convention.

3. **Criteria:** Nominees must be in good standing and a current paid up member of the Marine Corps League. Please review reference (a) for full details.
4. **Action:**

A. Any Marine Corps League member may nominate another Marine Corps League member or local citizen who meets the requirements of a giving spirit and unconditional service to community, nation, and humanity without regard to race, religion, or creed exemplified so dramatically by the Four Chaplains.

B. All nominations will be submitted using the current edition of the Chapel of 4 Chaplains Legion of Honor Award Nomination form. See enclosure (1)

C. All nominations must be received 30 days prior to the dates for the spring conference, fall conference, or the Department of Florida Marine Corps League Convention. (NO EXCEPTIONS)

D. All nominations will be scanned as a PDF file and emailed to John Gionet at sgtmajgna@gmail.com

4. **Contact Information:** Should anyone have any information may contact me at phone number (407) 963-9388 or by email at sgtmajgna@gmail.com

DISTRIBUTION:
- DOF MCL Officers and Staff
- All Detachment Commandants
- DOF MCL Website