

**APPLICATION FOR THE AMERICAN LEGION, DEPARTMENT OF WISCONSIN**  
**Emergency Medical Technician (EMT) Award**

Candidate: \_\_\_\_\_

Address: \_\_\_\_\_

Recommended by Post No. \_\_\_\_\_ of The American Legion located in \_\_\_\_\_

How long has the candidate been engaged in EMT work? \_\_\_\_\_

Candidates present position: \_\_\_\_\_

**PLEASE NOTE:**

1. The candidate must be currently employed as an EMT, not retired.
2. The candidate must be a U.S. citizen.
3. DO NOT submit any scrapbooks, as judging will be based on the criteria required below.
4. If Requirements stated below are not followed as outlined, and proper signatures are not obtained, **applicant will be disqualified.**

**REQUIREMENTS:**

**To assist you in the completion of your candidate's application/narrative please include the requirements listed below. The application/narrative cannot exceed eighteen (18) single-sided bond pages, on 8 ½" X 11" paper. This application form is the cover page of the application and shall not count as part of the Maximum 18 pages.**

**The first 6 or 7 pages should contain the candidate's service narrative/biography. The official 5"X7" Color photograph of the nominee is a must. The remaining pages may include supporting citations as well as other documentation, including press articles. Only one copy of the application/narrative should be submitted.**

- Recommendation form the candidate's superior.
- Resume of the candidates EMT experience, including honors that have been bestowed upon the candidate for outstanding EMT Performance. Citations for heroism or meritorious performance of duty should be explained for the past year.
- Biography of the candidate that includes education, family, church affiliation (if applicable), as well as any fraternal or social organization(s) with which the candidate is associated.
- Describe, in your opinion, what characteristics make this candidate an outstanding EMT. **Include accomplishments outside of the candidate's EMT accomplishments. Community involvement must be noted to be considered for the award.**
- Include a copy of your candidate's state or federal certification as an EMT.
- Please list any additional information you deem pertinent which may assist the committee in arriving at a final decision regarding your candidate's application.
- The applicant's narrative/biography must include a **5"X7" (only) color photograph in full duty uniform.**
- Certified Post winners are due to the District by April 1<sup>st</sup>; certified District winners are due to the Department by May 1<sup>st</sup>.

**Boxes above MUST be checked to ensure applicant/narrative is complete by chain of command (Post, County and District)**

**APPLICATION FOR THE AMERICAN LEGION, DEPARTMENT OF WISCONSIN**  
**Emergency Medical Technician (EMT) Award**

**CERTIFICATION OF POST**

This recommendation is submitted by \_\_\_\_\_ Post No. \_\_\_\_\_

The American Legion, Department of Wisconsin, located in the \_\_\_\_\_ District.

\_\_\_\_\_  
Post Adjutant

\_\_\_\_\_  
Post Commander

\_\_\_\_\_  
Date

\_\_\_\_\_  
Post Public Safety Chairman

---

**DISTRICT WINNER**

The American Legion, Department of Wisconsin, District \_\_\_\_\_ winner is the individual listed on the previous page.

\_\_\_\_\_  
District Adjutant

\_\_\_\_\_  
District Commander

\_\_\_\_\_  
Date

\_\_\_\_\_  
District Public Safety Chairman

In the event this candidate is declared the winner, will the candidate be available to appear at the Department Convention?  Yes  No