Sarasota County Veterans Commission Awards Nomination Form

Nominee Information

<table>
<thead>
<tr>
<th>Nominee’s Name</th>
<th>Nomination for: John H. McLain Award</th>
<th>Woman Veteran of the Year</th>
<th>Auxiliary Member of the Year</th>
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</thead>
<tbody>
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</tbody>
</table>

Mailing Address

City ___________________________ State ___________ Zip ___________

Phone ___________________________ Email ___________________________

Veterans Organization Affiliations ___________________________

Nominator’s Information

Nominator’s Name ___________________________

Mailing Address ___________________________

City ___________________________ State ___________ Zip ___________

Phone ___________________________ Email ___________________________

Nominating Organization (if applicable) ___________________________

Signature ___________________________ Title ___________________________ Date ___________

Nominees must reside in Sarasota County and/or volunteer full time in Sarasota County. For more information about these awards visit our website at SarasotaVeteransCommission.com. Please use page two of this form or a separate page to respond to the following inquires:

1. Briefly describe the nominee’s military service. Enter N/A for Auxiliary award nominees.
2. Describe in detail the Veterans related activities for which the nominee’s name is being submitted.

Nominations must be received by SCVC no later than October 15th. Mail nominations to:

Sarasota County Veterans Commission
Attn: Veteran of the Year Awards
PO Box 2055
Sarasota, FL 34230

Revised 8/26/18
Sarasota County Veterans Commission Awards Nomination Form (Page 2)
Please include this page with the nomination form. Separate pages may also be used.

Nominee’s Name

Nomination for: John H. McLain Award ☐ Woman Veteran of the Year ☐ Auxiliary Member of the Year ☐

(1) Briefly describe the nominee’s military service. Enter N/A for Auxiliary award nominees.

(2) Describe in detail the Veterans related activities for which the nominee’s name is being submitted.