



**THE AMERICAN LEGION**  
**DEPARTMENT OF WASHINGTON**  
**HUMANITARIAN OF THE YEAR APPLICATION**

Award to be presented annually at the Department Convention to an outstanding Humanitarian. Anyone who saved a human life in Washington State is eligible to receive this award. The individual selected will be chosen from candidates submitted by Post Law & Order Committees. See Department of Washington Operating Procedure 28. The applications for Humanitarian of the Year must be received at Department HQ by February 1<sup>st</sup> of each year.

Candidates Name: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Nominating Post: \_\_\_\_\_ Post Commander: \_\_\_\_\_

Commanders Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Post Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Agency Head (if applicable): \_\_\_\_\_ Phone #: \_\_\_\_\_

Agency Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Please complete the answers to the below questions. Attach additional sheets of paper to fully explain your answers if needed. Also, attach all documentation that is available.

1. Why is candidate outstanding? Endorsed by his peers or superiors.
2. Did candidate commit and act of Valor? YES ( ) NO ( ).
3. If an act of valor occurred and given publicity, please attach newspaper clippings, photos, or time and date of radio or TV coverage.
4. Has the candidate received local recognition from other organizations, including the Legion Post?
5. Has the Legion Post presented a certificate and or plaque to recognize the individual for their achievements?