



NOMINATION FORM

MARINE OF THE YEAR

ASSOCIATE MEMBER OF THE YEAR



AWARD SELECTION			
<i>Select either Marine of the Year or Associate of the Year</i>			
MARINE OF THE YEAR		ASSOCIATE MEMBER OF THE YEAR	
NOMINATOR			
DETACHMENT NAME			
DETACHMENT #			
COMMANDANT NAME			
EMAIL		PHONE NUMBER	
NOMINEE			
NAME			
CURRENT POSITION(S)			
AWARDS/RECOGNITION			
<i>List significant awards nominee has earned, i.e. Chapel of 4 Chaplains, MCL Awards, Presidential Awards, Hall of Fame, Veteran of the Year, etc.</i>			

CONTRIBUTIONS/SUPPORT TO THE MARINE CORPS LEAGUE

List bullets of nominees contributions to the MCL, i.e. (Detachment, Department, National, etc.)

CONTRIBUTIONS/SUPPORT TO MARINE CORPS LEAGUE PROGRAMS

List bullets of nominees contributions to MCL programs, Scouting, Young Marines, Youth Physical Fitness, Toys for Tots, Marine For Life, VAVS, Auxiliary, etc.

CONTRIBUTIONS/SUPPORT PROVIDED TO THEIR COMMUNITY

List bullets of nominees contributions to other veterans organizations, religious and civil institutions, etc.

[Empty space for listing contributions]

CERTIFICATION

By signing this document, we affirm that this nomination was approved by the detachment by majority vote at our general meeting on this date.

COMMANDANT		DATE	
ADJUTANT		DATE	

Print and sign this form. Then scan and email to moysdof@gmail.com