



VFW Life Saving Award Citation Entry Form

NOTE: Please attach and send with this form all documentation of the event (newspaper clippings, articles, etc.).

To be filled out by VFW Representative

Sponsoring Post: VFW Department:
Date of Presentation:

Nominee Information

Choose appropriate citation: (Regular, Line of Duty or Valor)
Full Name: (please list as you wish it stated on the citation)
Gender:
Occupation Title: (please list as you wish it stated on the citation or N/A)
Address:

VFW POC

Full Name:
Phone: Email:
Address: (for mailing citation)
City: State: Zip:

If the Post would like the Department to invite this individual to our Mid Winter Conference or State Convention for presentation of their award please choose one below. Make sure that their is an address listed above for the nominee.

Mid Winter Conference

State Convention