

## THE AMERICAN LEGION DEPARTMENT OF VERMONT TEL: 802-223-7131 – FAX: 802-223-0318

E-MAIL: alvthq@myfairpoint.net

## LAW OFFICER OF THE YEAR – APPLICATION

NAME (Last)	(First)	(M.I.)
ADDRESS		
DATE & PLACE OF BIRTH		
EDUCATION	MARITAL STATUS	MILITARY SVS (If Applicable)
BRANCH OF LAW ENFORCE etc.)	EMENT (i.e.: State Police, Sheriff, Ga	nme Warden, Local Police
	ED IN FIELD OF ENDEAVOR, RAN commendations, citations, etc.)	IK ATTAINED. (If any
	ON IN SPECIALTY AREAS: Scout ld, Fraternal Organizations, etc. (Use	
• •	l beyond the normal call of duty or spe	_
	erit special recognition. (Use additiona	
AUTHORIZED SIGNATURE		DATE

FORWARD COMPLETE APPLICATION TO: THE AMERICAN LEGION OF VERMONT P O BOX 396 – MONTPELIER, VT 05601-0396

**APPLICATIONS MUST BE SUBMITTED BY APRIL 15**