





MICHAEL GUTY HOMELESS VETERANS OUTREACH AWARD

Nomination Form

TheAr	herican Legion Department of:Date:
Entry (Check List:
	1,500 Words, typed and available in MS Word format
	Provide general program information: Program title, contact name and information, short program description, list of other organizations involved in this program, annual budget.
	Define program objectives and how this is a Legion Family effort
	Identify the number of homeless veterans in your community, list stand-down activity, community providers you work with, and fundraising efforts.
	Outline program success & impact
	Include articles/pictures
	Completed coversheet

Nominations by posts and individuals must be sent to department headquarters as soon as possible so that the department will have time to review all nominations received and make the selection of its winners.

All nominations from departments must arrive at National Headquarters on or before January 15th. Either the department adjutant or department employment chairman must approve this nomination.

ApprovedSig	nature:	Date:
Check One:	Oppartment Adjutant	O Department Employment Chairman
Desired prese	ntation date at Department Conve	ention:
Submit to:	The American Legion	
	Attn: National Veterans Employ	ment & Education Commission
	1608 K Street NW	
	Washington, DC 20006	
	Fax: 202-861-0404	
	Email: <u>VE&E@legion.o</u> rg	