



*Department of Illinois
Outstanding Chaplain's Award
Legion Year 2019-2020*



TO: DISTRICT COMMANDERS

Under the direction of Department Chaplain Ralph W. Rounds, II, with the sanction of the Religious Emphasis Committee and the delegated authority of the Department Commander Roy Weber, Chaplains who have done an outstanding job during the past Legion year will be awarded the Chaplain's Cross or Star of David. Department Commander Roy Weber and Department Chaplain Ralph W. Rounds, II will present the award to the selected chaplains at the Department Convention Memorial Service which will be held on July 11, 2020.

Each District Commander, with the advice of their Executive Committee, is requested to select one individual from their district who is serving in the capacity of a Post, County, District or Division Chaplain and who has specifically gone beyond merely performing his or her normal obligations of leading prayers at meetings.

Names of nominees with a short optional explanation of their work should be sent by the various posts and counties to their respective District Commanders for selection as the district nominee. **Each District Commander must send their nominee's name to Department Headquarters to be received no later than June 6, 2020 for review.** The nomination form must be signed by the District Commander.

IMPORTANT NOTE:

Chaplains who have previously been awarded the Chaplain's Cross or Star of David will not receive another Cross or Star of David again. However, if the District Commander deems it appropriate, a certificate will be issued to the selected Chaplain for his or her current service and nomination who has received a Cross or Star of David previously.

Examples of outstanding work by a chaplain would include: Working with and assisting the Post or District Service Officer, working with the Auxiliary Field Service program, assisting needy veterans and families with receiving aid from the Temporary Financial Assistance, Family Support Network of TS2 programs, visiting the sick at VA hospitals, homes, or facilities, or in their own homes, hospitals, or nursing homes, actively participating in memorial, patriotic and religious programs, visiting Boys State, assisting or being involved in various children's programs such as Miracle Network, organizing or assisting drives to help homeless veterans, providing spiritual care at wakes, funerals, etc.

This will be the 30th year that the Chaplain's Cross or Star of David will be awarded to outstanding Chaplains at the Department Convention. It is the Department Commander's and Department Chaplain's expectations that each District will nominate an individual worthy of its receipt. **Each District Commander is requested to complete the Nomination Form with an optional short narrative about the Chaplain's work. If you determine that there is no one in your District to nominate, please indicate that on the nomination form, sign it and return it to Department Headquarters.**

May God bless you and your Chaplains in your selection and nomination process.

If you have any questions, please contact Department Chaplain Ralph W. Rounds, II at (217) 536-9137

<See other side for Nomination Form>

Chaplain's Award Nomination Form for 2019-2020

District # _____ (Name of Nominee)

of Post # _____ for recognition as an outstanding Chaplain from said District.

I have no one to nominate. Please select the preferred award: Chaplain's Cross
 Star of David

_____ (District Commander) _____ (Date)

*This form **must** be signed by the District Commander and sent to
The American Legion Department Headquarters in Bloomington, Illinois
TO BE RECEIVED NO LATER THAN JUNE 6, 2020*

Nominations are accepted by mail only. Please DO NOT call in your Nominations.

Has the nominated individual been previously awarded the Chaplain's Award? Yes _____ No _____

***Will the nominated Chaplain attend the Convention Memorial Service?** Yes _____ No _____

If not, it is requested that a representative be appointed to receive the Chaplain's Award on the Chaplain's behalf.
Please provide the name and position/Title of the representative to the Department Chaplain:

_____ Name _____ Title _____

Short Narrative indicating the nominated Chaplain's work (optional):

Reviewed: _____
Department Chaplain

Date: _____