

AIR COMMANDO HALL OF FAME NOMINATION FORM

Completion of this form, pages 1-5, is required along with other verifiable documents such as DD Form 214s, citations, award certificates, etc., and preferably emailed to info@aircommando.org. If unable to email, see last page of this form for mailing address.

• **Nominee:** _____ **Rank:** _____ **Uc wu'cpf 'F cvg'Ugt xleg'Gpf gf :** _____
Full Name (First / MI / Last) Ugr ctcvgr "Tgvtgf "aa-aaaa (MM/YYYY)

• **Career Field/Specialty:** _____

• **Special Operations Units Assigned with Dates:**
(MM/YYYY)

_____ From ___/___/___ To ___/___/___
 _____ From ___/___/___ To ___/___/___
 _____ From ___/___/___ To ___/___/___
 _____ From ___/___/___ To ___/___/___
 _____ From ___/___/___ To ___/___/___
 _____ From ___/___/___ To ___/___/___

• **Operational Deployments with Dates:**
(MM/YYYY)

_____ From ___/___/___ To ___/___/___
 _____ From ___/___/___ To ___/___/___
 _____ From ___/___/___ To ___/___/___
 _____ From ___/___/___ To ___/___/___
 _____ From ___/___/___ To ___/___/___
 _____ From ___/___/___ To ___/___/___

• **Significant Awards/Decorations:** _____

• **Narrative:** Submit a narrative of 3 pages or less of significant and verifiable contributions to special operations. Be specific including assignments, accomplishments, and reasons the nominee should be given this very special recognition. *(Use page 2-4 of this form to complete the narrative. The form is formatted with 12-pitch, Times New Roman font, with 1-inch margins, single spacing. Approximately 610 words per page.)*

• **Citation:** Submit a one-paragraph (no more than 275 words) citation highlighting the salient points of the nomination to be read at the induction ceremony. *(Use page 5 of this form to complete the citation.)*

• **References:** (two with their full names, rank, mail and email addresses, and phone numbers)

Full Name: _____	Full Name: _____
Rank: _____	Rank: _____
Address: _____	Address: _____
City/State/Zip: _____	City/State/Zip: _____
Phone: _____	Phone: _____
Email: _____	Email: _____

• Include a copy of nominees' DD-214 or equivalent documentation to verify service, include a photo, if available. *(Preferably an 8"x10" digital color photo in high resolution format.)*

• Include contact information for both the nominator and the nominee

Nominator Name: _____	Nominee Name: _____
Address: _____	Address: _____
City/State/Zip: _____	City/State/Zip: _____
Phone: _____	Phone: _____
Email: _____	Email: _____

I hereby submit and verify the nominee's information for the Air Commando Hall of Fame.
 Date: ___/___/___
(DD/MM/YYYY)

Narrative Justification

Once you reach the limit of text on this page, please start typing on page 3 to conclude your narrative justification.

Narrative Justification

(continued)

Once you reach the limit of text on this page, please start typing on page 4 to conclude your narrative justification.

Narrative Justification

(continued)

You have reached the limit of text for your narrative justification.

Citation for Induction Ceremony

Type one paragraph (275 word limit)

Please use the below space if more room is needed from page 1.

Special Operations Units Assigned with Dates (cont.):

Operational Deployments with Dates (cont.):

Significant Awards/Decorations (cont.):

*Those unable to electronically email this package may mail it to:
Air Commando Association, Attention: Hall of Fame Committee, PO Box 7, Mary Esther, FL 32569*