



## Nomination Form

### New York State Senate Veterans Hall of Fame

*To ensure the accuracy and completeness of information submitted for consideration, the nominee should fill out the form below.*

#### **Personal:**

Name of Nominee: \_\_\_\_\_

Name and Title of Nominating Individual: \_\_\_\_\_

Military Branch: \_\_\_\_\_

Nominee's Rank and File: \_\_\_\_\_

Length of Military Service: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Birth date: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Other Degrees and/or Certifications: \_\_\_\_\_

Military Awards or Achievements: \_\_\_\_\_

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**Civic Contributions:**

Volunteer Service: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Civic, Community or Business Accomplishments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Awards and Recognition: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Past and Present Occupations: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

