



# SONS OF THE AMERICAN LEGION DETACHMENT OF NEW JERSEY SON OF THE YEAR



**2009-2010**

**NOMINEE INFORMATION:**

NAME: \_\_\_\_\_ MEMBERSHIP #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE # 1 \_\_\_\_\_ PHONE # 2 \_\_\_\_\_

SQUADRON # \_\_\_\_\_ COUNTY: \_\_\_\_\_

NAME/TITLE OF NOMINATING MEMBER: \_\_\_\_\_

Nominating member- please complete the following information: CAP SIZE: \_\_\_\_\_

Is Nominee in good standing within Squadron? \_\_\_\_\_ Are dues paid up to date? \_\_\_\_\_

Has nominee exhibited knowledge of the ideals and principles of the SAL? \_\_\_\_\_

Does nominee have knowledge of the programs of the American Legion and SAL? \_\_\_\_\_

Is nominee active with The American Legion Family (Legion, Sons, Auxiliary)? \_\_\_\_\_

Has the nominee held any offices within Squadron, County or Detachment? \_\_\_\_\_ If 'Yes', please specify , including dates on separate page.

**Please list the outstanding achievement or project from May 1, 2009 to May 1, 2010 administration year *only* for which the**

**SAL member is being nominated- attach separate pages with detailed explanation of achievement (s).**

Rules of Nomination:

- 1) **Eligibility paperwork MUST be submitted with application (DD214), and copy of current membership card**
- 2) Member must be in good standing within his squadron.
- 3) Member should be active within The American Legion Family.
- 4) Member must have knowledge of the principles/programs of the S.A.L..
- 5) Member must be familiar with programs of The American Legion.
- 6) Member should have a respectable appearance since he is a representative of the Sons of The American Legion.
- 7) Application must be attested by both post and squadron.
- 8) Application is open to all SAL members, regardless of age.
- 9) Nominating member must be from the nominee's own squadron.
- 10) Must have list of Volunteer hours (no tips etc. ) and personal donations.

(Nomination cannot be made for a member from a different squadron)

**DEADLINE FOR APPLICATION IS MAY 1, 2010**

**NO APPLICATIONS WILL BE ACCEPTED AFTER THE DEADLINE DATE**

We attest that the nominee has met all requirements of this application:

POST COMMANDER: \_\_\_\_\_

Mail nominating application to:  
Dean Staknys, Chairman  
765 Bay Avenue  
Toms River, NJ 08753

POST S.A.L. ADVISOR: \_\_\_\_\_

**DEADLINE FOR RECEIPT OF APPLICATIONS: MAY 1, 2010**