APPLICATION FOR FIVE-STAR AWARD SUPPLIES
SONS OF THE AMERICAN LEGION

_____ _____, _____ _____
Date City State Zip

Department Headquarters, The American Legion

This is to certify that _____, member of

Squadron No. _____ Detachment of _____,

City of _____, has successfully completed his test on

(check one)

(1) Patriotism ☐

(2) Citizenship ☐

(3) Discipline ☐

(4) Leadership ☐

(5) Legionism ☐

(6) Has passed all of the above Star Award tests and is entitled to have the Five Star Award Medal ☐

Please mail the above insignia to: _____

_____

_____

Attested by: _____ _____
Post Adjutant Post No.

_____
City

Approved by: _____
Department Officers

Note: This form is to be mailed to Department Headquarters. Insignia for the Five-Star Award can only be given by certification. All orders must first be approved by Department or Detachment Headquarters and sent together with the remittance to The American Legion Emblem Sales, PO Box 1050, Indianapolis, Indiana 46206-1050.