

VFW Cadet of the Year Nomination Form

Students Name: _____

Name of School: _____ Grade: _____

Cadet Program: _____

Address: Street/PO Box _____

City _____ State _____ Zip Code _____

Student's Phone Number: _____

Student's Email Address: _____

Parent's Name: _____

Parent's Phone Number: _____

Parent's Email Address: _____

Number of Years in Cadet Program _____ Recommendation of the instructor: _____

Other Clubs/Programs Involved in: _____

Please attach the following:

A copy of your most current transcript

Recommendation letter (as many as possible) from your community, teachers, and fellow students

A self-written letter regarding your accomplishments and listed in the qualifications criteria.

Any other documentation you wish to submit.

Nominee (full name): _____

Signature: _____

*By signing this form you release the VFW to be able to print your name in general communication and possible pictures.

Post Number _____ Post Point of Contact name: _____

Post Chairman/Commander: (print & sign) _____

Post Contact Information: Address: _____

Phone Number: _____ Email: _____