



**NOMINATE YOUR  
POST FOR:  
BEST POST  
**AMERICANISM  
PROGRAM****

## End of Year Award Instructions:

- 1) A copy of your National Consolidated Post Report and Department Addendum **must be on file with Department Headquarters** to be eligible for this award.
- 2) Include a narrative containing information or comments concerning the Americanism activities of your Post such as:
  - School Medals
  - Baseball
  - Scouting
  - Boys State
  - Sea Cadets
  - Oratorical Contest
  - Shooting Sports
  - Patriotic Holidays
  - Flag Education Activities
  - Service to God and Country
  - Community Service
  - Get Out the Vote and Education Activities

This can be a single page (typed or printed clearly). Review the American Legion's Americanism Manual for an explanation of all programs and activities under Americanism.

- 3) Neatness and clarity are necessities for judging consideration.
- 4) First place and runner-up will be selected.
- 5) The signature of the Post Americanism Chairman and Post Commander must be at the end of the report.

**MAIL SUBMISSION TO:** Florida American Legion  
P.O. BOX 547859  
Orlando, FL 32854-7859  
Attn: Programs Director

**E-MAIL SUBMISSION TO:** [programs@floridalegion.org](mailto:programs@floridalegion.org)

***\*\*Nomination must be received no later than May 4, 2026\*\****



Department Convention & End of the Year Awards  
Nomination Form

*Attach a one to two (1-2) paged written narrative to this form*

**DEADLINE: MAY 4, 2026**

Title of Award: **BEST POST AMERICANISM PROGRAM AWARD**

District#: \_\_\_\_\_ Post#: \_\_\_\_\_

Name of Americanism Chair: \_\_\_\_\_

Name of Report Preparer: \_\_\_\_\_

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

Post Phone#: \_\_\_\_\_

Has post attached a one to two (1-2) page narrative report? Yes or No

Has post submitted their National Consolidated Post Report AND Department CPR Addendum to the Department Headquarters? Yes or No

Signature of Post Commander: \_\_\_\_\_

Name of Report Preparer: \_\_\_\_\_

**NOMINATE YOUR POST FOR:**  
**BEST POST**  
**BLOOD DONOR PROGRAM**

**End of Year Award Instructions:**

- 1) A copy of your National Consolidated Post Report and Department Addendum **must be on file with Department Headquarters** to be eligible for this award.
- 2) The reporting period is from May 1, 2025 – April 30, 2026. Any donations and information after this date must go on next year's report.
- 3) For awards – a letter from the local blood bank listing the total ***Blood Units*** on file for the account and number of participants from your Post must be attached to your report.
- 4) Include a narrative containing information or comments concerning the Blood Donor activities of your post such as: how many donated units were collected by Legion, Auxiliary, SAL or the community, how these units were utilized and any special activities for the Blood Donor Program.

**AWARDS ARE:** Margaret Skaggs Memorial (1st place)  
Runner-up (2nd place)

**MAIL SUBMISSION TO:** Florida American Legion  
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May 4, 2026\*\****



Department Convention & End of the Year Awards  
Nomination Form

*Attach a one to two (1-2) page written narrative to this form*

**Deadline: May 4, 2026**

Title of Award: **MARGARET SKAGGS MEMORIAL: BEST POST  
BLOOD DONOR PROGRAM AWARD**

District#: \_\_\_\_\_ Post#: \_\_\_\_\_

Name of Blood Donor Chair: \_\_\_\_\_

Name of Report Preparer: \_\_\_\_\_

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

Post Phone#: \_\_\_\_\_

Has post attached a one to two (1-2) page narrative  
report? Yes or No

Has post submitted their National Consolidated  
Post Report AND Department CPR Addendum to  
the Department Headquarters? Yes or No

Signature of Post Commander: \_\_\_\_\_

Signature of Report Preparer: \_\_\_\_\_

**NOMINATE YOUR POST FOR:**  
**OUTSTANDING POST**  
**SCOUTING PROGRAM**

**End of Year Award Instructions:**

- 1) A copy of your National Consolidated Post Report and Department Addendum **must be on file with Department Headquarters** to be eligible for this award.
- 2) The reporting period is from May 1, 2026 – April 30, 2026.
- 3) Awards will go to the Post with the most involvement in the Scouting Program. Involvement is more important than donations.
- 4) Include a narrative containing information or comments concerning the Scouting activities of your post such as. You may include photographs and newspaper clippings.

**AWARDS ARE:** Up to three Posts will receive an Outstanding Post Scouting Program award.

**MAIL SUBMISSION TO:** Florida American Legion  
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Orlando, FL 32854-7859  
Attn: Programs Director

**E-MAIL SUBMISSION TO:** [programs@floridalegion.org](mailto:programs@floridalegion.org)

***\*\*Nomination must be received no later than  
May 4, 2026\*\****



Department Convention & End of the Year Awards  
Nomination Form

*Attach a one to two (1-2) page written narrative to this form*

**Deadline: May 4, 2026**

Title of Award: **OUTSTANDING POST SCOUTING PROGRAM AWARD**

District#: \_\_\_\_\_ Post#: \_\_\_\_\_

Name of Scouting Chair: \_\_\_\_\_

Name of Report Preparer: \_\_\_\_\_

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

Post Phone#: \_\_\_\_\_

Has post attached a one to two (1-2) page narrative report?      Yes      or      No

Has post submitted their National Consolidated Post Report AND Department CPR Addendum to the Department Headquarters?      Yes      or      No

Signature of Post Commander: \_\_\_\_\_

Signature of Report Preparer: \_\_\_\_\_

**NOMINATE YOUR POST FOR:**  
**BEST POST**  
**Children & Youth PROGRAM**

**End of Year Award Instructions:**

- 1) A copy of your National Consolidated Post Report and Department Addendum **must be on file with Department Headquarters** to be eligible for this award.
- 2) The reporting period is from May 1, 2025 – April 30, 2026.
- 3) This is a typed narrative report on special events, unusual activities or “Areas of Concern” (Missing Children, Teenage Suicide. Indoor/ Outdoor Safety, Drug Abuse Prevention).
- 4) Required format:
  - Black and white or color photos
  - News items (include date and name of newspaper)
  - Letters, etc. in chronological order
  - Title Page – include the Post Number, District and the name and title of the individual making the report. Make sure the report is in booklet format.

**DEPARTMENT AWARDS:**

- Best Overall Post- 1st place
- Best Overall Post - Runner-up
- Post Children & Youth Chairman of the Year- 1st place
- Post Children & Youth Chairman of the Year- Runner-up

**NATIONAL AWARDS:**

- Annual Children & Youth Citations
- Special citations for Most Outstanding Children & Youth work.
- Certificates of Meritorious Service

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***\*\*Nomination must be received no later than  
May 4, 2026\*\****



Department Convention & End of the Year Awards  
Nomination Form

*Attach a one to two (1-2) page written narrative to this form*

**Deadline: May 4, 2026**

Title of Award: **BEST POST CHILDREN & YOUTH PROGRAM AWARD**

District#: \_\_\_\_\_ Post#: \_\_\_\_\_

Name of Children & Youth Chair: \_\_\_\_\_

Name of Report Preparer: \_\_\_\_\_

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

Post Phone#: \_\_\_\_\_

Has post attached a one to two (1-2) page narrative  
report? Yes or No

Has post submitted their National Consolidated  
Post Report AND Department CPR Addendum to  
the Department Headquarters? Yes or No

Signature of Post Commander: \_\_\_\_\_

Signature of Report Preparer: \_\_\_\_\_





## Department Convention & End of the Year Awards Nomination Form

*Attach a one-two paged written narrative to this form*

**Deadline: May 4, 2026**

Title of Award: **POST CHILDREN & YOUTH  
CHAIR OF THE YEAR AWARD**

### **Section A:**

Were Halloween brochures ordered by your chair?.....yes / no  
Was reporting emphasized by your chair?..... yes / no  
Did your chair attend any district workshops?.....yes / no  
Did your chair attend your area conference? .....yes / no  
Did your chair order Temporary Financial Assistance materials? .....yes / no  
Did your chair submit an application on behalf of a veteran's family from  
your Post for Temporary Financial Assistance? ..... yes / no  
Did your chair order Child Welfare Foundation materials? .....yes / no  
Did your chair order posters and collection canisters from the  
Child Welfare Foundation? .....yes / no  
Did your chair attend the Department Convention? .....yes / no  
Did your chair make a year-end report to Department?.....yes / no  
Did your chair concentrate efforts on either one of our National areas  
of concern or on an Annual Program Area?.....yes / no  
Miles your chair traveled for Children & Youth programs? \_\_\_\_\_  
Hours your chair gave to Children & Youth programs? \_\_\_\_\_  
Number of Children & Youth projects promoted by your chair? \_\_\_\_\_

**Section B – LETTERS OF RECOMMENDATION:** To augment this brief questionnaire, submit separate letters of recommendation from schools, churches, District and/or Area Commander.

**Section C – NARRATIVE:** To help in determining the best Children & Youth Chair in the Department, a narrative report of outstanding accomplishments will be the most important facet of this competition.

**Sections A, B, and C *must* be complete  
for your Post Chair to qualify**

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Name of Post C&Y Chair

Post number

Signature Post Commander

MAIL SUBMISSION TO:

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Orlando, FL 32854-7859  
Attn: Programs Director

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[programs@floridalegion.org](mailto:programs@floridalegion.org)





SUBMIT YOUR  
POST:  
**HISTORY BOOKS  
& Narratives**

### History Contest –

- Winner History Yearbook Contest
- Winner History Narrative Contest
- Winner ALR History Yearbook Contest

At the Department of Florida Convention your Post and/or ALR Chapter can submit a narrative and/or yearbook to show what events and activities the Post/Chapter has been involved in for the 2025-2026 year. The rules for your particular book are in the Department of Florida Historian Manual.

**BRING** all History books (hard copy & thumb drive) for competition to the **Department Convention, at Hilton Orlando Lake Buena Vista; 1751 Hotel Plaza Blvd Lake Buena Vista, FL 32830**. There will be a table set up in the Headquarters Office for you to place your book on by 3:30 PM, Thursday, June 11th.

*If you are unable to make the Department Convention, you can mail in your submission to Department Headquarters at 1912A Lee Road, Orlando, FL 32810, ATTN: Programs Director. Your submission must be received no later than June 3, 2026.*



**NOMINATE YOUR  
POST FOR:  
**BEST POST**  
**RELIGIOUS EMPHASIS PROGRAM****

**End of Year Award Instructions:**

- 1) A copy of your National Consolidated Post Report and Department Addendum **must be on file with Department Headquarters** to be eligible for this award.
- 2) Post Chaplains, now is the time to make your report on this year's activities. This includes reports on visitations to disabled veterans, distance you have traveled and the many hours you have devoted in your service as Chaplain. Let us gather our thoughts and apply all our God given talents and look at our many fine accomplishments.
- 3) All reports for the Religious Emphasis awards must include: narrative, photographs and publicity if possible. Use the Religious Emphasis Report form on the next page as a guideline for this narrative.

The following awards will be presented at the Department Convention:

- Best Post Religious Emphasis Program (1st place and runner-up)
- Best Post "Four Chaplains Memorial Service" (1st place and runner-up)

MAIL SUBMISSION TO: Florida American Legion  
P.O. BOX 547859  
Orlando, FL 32854-7859  
Attn: Programs Director

E-MAIL SUBMISSION TO: [programs@floridalegion.org](mailto:programs@floridalegion.org)

***\*\*Nomination must be received no later than  
May 4, 2026\*\****



## Department Convention & End of the Year Awards Nomination Form

*Attach a one to two (1-2) page written narrative to this form*

**Deadline: May 4, 2026**

Title of Award: **BEST POST RELIGIOUS EMPHASIS PROGRAM AWARD**

**MAIL TO:** The American Legion, Dept. of Florida  
PO Box 547859  
Orlando, FL 32854-7859  
Attn: Programs Director

1. Does your Post open and close meetings with prayer? Y\_\_\_\_\_N\_\_\_\_\_
2. Does your Post initiate new members? Long form \_\_\_\_\_ Short form \_\_\_\_\_
3. Do you participate in initiations? Y\_\_\_\_\_N\_\_\_\_\_ # of new members \_\_\_\_\_
4. Did you conduct a "Religious Emphasis" program at your Post? Y\_\_\_\_\_N\_\_\_\_\_
5. Did you hold a "Four Chaplains" program at your Post, or participate in a joint program in your community or local church? Y\_\_\_\_\_N\_\_\_\_\_
6. Did you take part in any of the following:  
Memorial Day \_\_\_\_\_ Veterans' Day \_\_\_\_\_ Armed Forces Day \_\_\_\_\_  
Presidents' Day \_\_\_\_\_ Citizenship Day \_\_\_\_\_ Columbus Day \_\_\_\_\_  
List Others \_\_\_\_\_
7. How many funerals did you participate in for Post members? \_\_\_\_\_
8. How many VA Medical Centers did you visit? \_\_\_\_\_
9. How many Post members visited in other Hospitals? \_\_\_\_\_
10. How many nursing homes and/or in-home visits did you make? \_\_\_\_\_
11. Does your Post keep a list of members with no relatives? \_\_\_\_\_
12. How many miles traveled? \_\_\_\_\_ How many hours? \_\_\_\_\_

**NARRATIVE:** To help in determining the best Religious Emphasis Program in the Department, a narrative report of outstanding accomplishments will be the most important facet of this competition.

Chaplain: \_\_\_\_\_ Post# \_\_\_\_\_ #Members \_\_\_\_\_

\_\_\_\_\_  
Signature of Post Commander or Adjutant

\_\_\_\_\_  
Date



## Department Convention & End of the Year Awards Nomination Form

*Attach a one to two (1-2) page written narrative to this form*

**Deadline: May 4, 2026**

Title of Award: **BEST POST FOUR CHAPLAINS MEMORIAL SERVICE AWARD**

District#: \_\_\_\_\_ Post#: \_\_\_\_\_

Name of Religious Emphasis Chair/Chaplain: \_\_\_\_\_

Name of Report Preparer: \_\_\_\_\_

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

Post Phone#: \_\_\_\_\_

Has post attached a one-two (1-2) page narrative report?                      Yes      or      No

Has post submitted their National Consolidated Post Report AND Department CPR Addendum to the Department Headquarters?                      Yes      or      No

Signature of Post Commander: \_\_\_\_\_

Signature of Report Preparer: \_\_\_\_\_





**NOMINATE YOUR POST FOR:**  
**BEST POST**  
**SCHOOL MEDAL**  
**PROGRAM**

**End of Year Award Instructions:**

- 1) A copy of your National Consolidated Post Report and Department Addendum **must be on file with Department Headquarters** to be eligible for this award.
- 2) The reporting period is from May 1, 2025 – April 30, 2026. Any donations and information after this date must go on next year's report.
- 3) Include a narrative containing information or comments concerning the School Medal activities of your Post such as:
  - The number of members in your Post
  - The name of each school to which awards were presented
  - How many medals given: small or large
  - How much money was spent
  - How many hours were worked by Post members
  - How many medals to each elementary, middle, and high school
  - How many members involved
  - The signature of the Post School Medal or Americanism Chairman and Post Commander must be at the end of the narrative

**AWARDS ARE:** Best Post School Medal Program (1st place)  
Runner-up (2nd place)

**MAIL SUBMISSION TO:** Florida American Legion  
P.O. BOX 547859  
Orlando, FL 32854-7859  
Attn: Programs Director

**E-MAIL SUBMISSION TO:** [programs@floridalegion.org](mailto:programs@floridalegion.org)

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Department Convention & End of the Year Awards  
Nomination Form

*Attach a one to two (1-2) page written narrative to this form*

**Deadline: May 4, 2026**

Title of Award: **BEST POST SCHOOL MEDALS PROGRAM AWARD**

District#: \_\_\_\_\_ Post#: \_\_\_\_\_

Name of School Medal Chair: \_\_\_\_\_

Name of Report Preparer: \_\_\_\_\_

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

Post Phone#: \_\_\_\_\_

Has post attached a one to two (1-2) page narrative report?      Yes      or      No

Has post submitted their National Consolidated Post Report AND Department CPR Addendum to the Department Headquarters?      Yes      or      No

Signature of Post Commander: \_\_\_\_\_

Signature of Report Preparer: \_\_\_\_\_

**NOMINATE YOUR POST FOR:**  
**BEST POST**  
**JROTC PROGRAM**

End of Year Award Instructions:

- 1) A copy of your National Consolidated Post Report and Department Addendum **must be on file with Department Headquarters** to be eligible for this award.
- 2) The reporting period is from May 1, 2025 – April 30, 2026. Any donations and information after this date must go on next year's report.
- 3) Include a narrative containing information or comments concerning the JROTC/ ROTC activities of your Post such as:
  - Monies donated or spent on dinners, awards, supplies, dances, small arms or anything else
  - Activities the Post participated in; including Flag Disposal Ceremonies, Flag Day, Four Chaplains, Memorial Day, etc.
  - The signature of the Post JROTC Chairman and the Post Commander must be at the end of the narrative

**AWARDS ARE:** Best Post JROTC Program (1st place)  
Runner-up (2nd place)

**MAIL SUBMISSION TO:** Florida American Legion  
P.O. BOX 547859  
Orlando, FL 32854-7859  
Attn: Programs Director

**E-MAIL SUBMISSION TO:** [programs@floridalegion.org](mailto:programs@floridalegion.org)

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Department Convention & End of the Year Awards  
Nomination Form

*Attach a one to two (1-2) page written narrative to this form*

**Deadline: May 4, 2026**

Title of Award: **BEST POST JROTC PROGRAM AWARD**

District#: \_\_\_\_\_ Post#: \_\_\_\_\_

Name of JROTC/JSS Chair: \_\_\_\_\_

Name of Report Preparer: \_\_\_\_\_

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

Post Phone#: \_\_\_\_\_

Has post attached a one-two (1-2) page narrative report?                      Yes      or      No

Has post submitted their National Consolidated Post Report AND Department CPR Addendum to the Department Headquarters?                      Yes      or      No

Signature of Post Commander: \_\_\_\_\_

Signature of Report Preparer: \_\_\_\_\_

**NOMINATE YOUR POST FOR:**  
**BEST POST**  
**SHOOTING SPORTS**  
**PROGRAM**

**End of Year Award Instructions:**

- 1) A copy of your National Consolidated Post Report and Department Addendum **must be on file with Department Headquarters** to be eligible for this award.
- 2) The reporting period is from May 1, 2025 – April 30, 2026. Any donations and information after this date must go on next year's report.
- 3) Include a narrative containing information or comments concerning the Shooting Sports activities of your Post such as:
  - Monies donated or spent on dinners, targets, awards, supplies, small arms or anything else
  - Activities the Post participated in
  - The signature of the Post Shooting Sports Chairman and the Post Commander must be at the end of the narrative

**AWARDS ARE:** Best Post Shooting Sports Program (1st place)  
Runner-up (2nd place)

**MAIL SUBMISSION TO:** Florida American Legion  
P.O. BOX 547859  
Orlando, FL 32854-7859  
Attn: Programs Director

**E-MAIL SUBMISSION TO:** [programs@floridalegion.org](mailto:programs@floridalegion.org)

***\*\*Nomination must be received no later than  
May 4, 2026\*\****



Department Convention & End of the Year Awards  
Nomination Form

*Attach a one to two (1-2) page written narrative to this form*

**Deadline: May 4, 2026**

Title of Award: **BEST POST SHOOTING SPORTS PROGRAM AWARD**

District#: \_\_\_\_\_ Post#: \_\_\_\_\_

Name of JROTC/JSS Chair: \_\_\_\_\_

Name of Report Preparer: \_\_\_\_\_

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

Post Phone#: \_\_\_\_\_

Has post attached a one to two (1-2) page narrative report?      Yes      or      No

Has post submitted their National Consolidated Post Report AND Department CPR Addendum to the Department Headquarters?      Yes      or      No

Signature of Post Commander: \_\_\_\_\_

Signature of Report Preparer: \_\_\_\_\_

**NOMINATE YOUR SGT-AT-ARMS FOR:**  
**THE EDDIE HUMER AWARD**

The Eddie Humer Award **for the most outstanding Post Sergeant-At-Arms** will be presented at the Department Convention. Now is the time for your Post to reward your Sergeant-At-Arms for his/her contribution to the success of his/her year of service to The American Legion.

A copy of your National Consolidated Post Report and Department Addendum must be on file with Department Headquarters to be eligible for this award. ***DEADLINE: May 4, 2026.*** A narrative is required.

**MAIL SUBMISSION TO:**

Florida American Legion  
P.O. BOX 547859  
Orlando, FL 32854-7859  
Attn: Programs Director

**E-MAIL SUBMISSION TO:**

[programs@floridalegion.org](mailto:programs@floridalegion.org)



Department Convention & End of the Year Awards  
Nomination Form

*Attach a one to two (1-2) page written narrative to this form*

**Deadline: May 4, 2026**

Title of Award: **THE EDDIE HUMER; SGT-AT-ARMS AWARD**

District#: \_\_\_\_\_ Post#: \_\_\_\_\_

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

Name of Report Preparer: \_\_\_\_\_

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

Post Phone#: \_\_\_\_\_

Has post attached a one to two (1-2) page narrative  
report? Yes or No

Has post submitted their National Consolidated  
Post Report AND Department CPR Addendum to  
the Department Headquarters? Yes or No

Signature of Post Commander: \_\_\_\_\_

Signature of Report Preparer: \_\_\_\_\_





NOMINATE YOUR  
POST FOR:  
**BEST POST**  
**PUBLIC RELATIONS**  
**PROGRAM**

## End of Year Award Instructions:

- 1) A copy of your Consolidated Post Report and Addendum **must be on file with Department Headquarters** to be eligible for this award.
- 2) The reporting period is from May 1, 2025 – April 30, 2026.
- 3) Include a one to two (1-2) page narrative containing information or comments summarizing how you have affected public relations for your Post through your work. Where possible, include copies of print articles or links to television and radio reports.

The following awards will be made at the Department Convention:

- Best Post Public Relations Program (1st Place)
- Runner-up Best Post Public Relations Program (2nd Place)

MAIL SUBMISSION TO: Florida American Legion  
P.O. BOX 547859  
Orlando, FL 32854-7859  
Attn: Programs Director

E-MAIL SUBMISSION TO: [programs@floridalegion.org](mailto:programs@floridalegion.org)

***\*\*Nomination must be received no later than  
May 4, 2026\*\****



## NOMINATION FOR BEST POST PUBLIC RELATIONS AWARD

### **Deadline: May 4, 2026**

Mail Application To: American Legion, Department of Florida  
ATTN: Programs Director  
P.O. Box 547859  
Orlando, Florida 32854-7859  
Email Application To: [programs@floridalegion.org](mailto:programs@floridalegion.org)

District#: \_\_\_\_\_ Post#: \_\_\_\_\_

Name of Public Relations Chair: \_\_\_\_\_

Name of Report Preparer: \_\_\_\_\_

Post Address & Phone Number: \_\_\_\_\_

#### **ELIGIBILITY REQUIREMENTS:**

1. A member in good standing of The American Legion
2. If these post PR duties are carried out by a member of the Post, Sons of The Legion Squadron, they also can qualify for this award.
3. The Post nominating a member must have a completed Consolidated Post Report submitted to the Department for the year in which the nominee served in a PR capacity.

The Post Commander shall submit a narrative on Post letter head meeting the deadline for submission and the narrative should contain the following type of information:

1. Please describe what Public Relations efforts were made by the nominee to inform the local community about the passing of The Legion Act.
2. Maintenance of Post website, Facebook, etc.
3. Print news media press releases.
4. Radio or television appearance
5. A description of how these Public Relations impacted your Post. Did your membership increase?

The submitting posts are highly encouraged to include paper copies of articles, press releases, etc., if available.

Signature of Post Commander: \_\_\_\_\_

Signature of Report Preparer: \_\_\_\_\_

**NOMINATE YOUR  
POST FOR:  
BEST POST  
SOCIAL MEDIA PROGRAM**

## End of Year Award Instructions:

- 1) A copy of your Consolidated Post Report and Addendum **must be on file with Department Headquarters** to be eligible for this award.
- 2) The reporting period is from May 1, 2025 – April 30, 2026.
- 3) Include a one-to-two-page narrative containing information or comments summarizing how you have affected social media for your Post through your work. Provide examples of the ways you were able to use social media to reach your members, and community about the American Legion and your post.

The following awards will be given at the Department Convention:

- Best Post Social Media Program (1st Place)
- Runner-up Best Post Social Media Program (2nd Place)

MAIL SUBMISSION TO: Florida American Legion  
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Attn: Programs Director

E-MAIL SUBMISSION TO: [programs@floridalegion.org](mailto:programs@floridalegion.org)

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May 4, 2026\*\****



**NOMINATION FOR ANNUAL SOCIAL MEDIA AWARD**  
**Deadline: May 4, 2026**

Mail Application To: American Legion, Department of Florida  
ATTN: Programs Director  
P.O. Box 547859  
Orlando, Florida 32854-7859

Email Application To: [programs@floridalegion.org](mailto:programs@floridalegion.org)

District#: \_\_\_\_\_ Post#: \_\_\_\_\_

Name of Social Media Chair: \_\_\_\_\_

Name of Report Preparer: \_\_\_\_\_

Post Address & Phone Number: \_\_\_\_\_

**ELIGIBILITY REQUIREMENTS:**

1. A member in good standing of The American Legion
2. If these post Social Media duties are carried out by a member of the Post, Sons of The Legion Squadron, they also can qualify for this award.
3. The Post nominating a member must have a completed Consolidated Post Report submitted to the Department for the year in which the nominee served in a Social Media capacity.

The Post Commander should submit a narrative on Post letter head meeting the deadline for submission and the narrative should contain the following type of information:

1. Please describe and provide examples what Social Media efforts were made by the nominee to inform members and the local community about The American Legion.
2. Maintenance of Post websites, Facebook, Instagram, YouTube, etc.
  - a. Provide links to your social media accounts.
3. A description of how these Social Media posts impacted your Post. Did your members engage with your posts and how did it affect your engagement stats? Did your membership increase?

The submitting posts are encouraged to provide paper copies of ways they used social media to reach their members and local community, ie. Calendars, newsletters, flyers, press releases of events (one copy of each will suffice).

Signature of Post Commander: \_\_\_\_\_

Signature of Report Preparer: \_\_\_\_\_

**NOMINATE YOUR POST FOR:**  
**BEST POST**  
**SEA CADET PROGRAM**

End of Year Award Instructions:

1. A copy of your National Consolidated Post Report and Department Addendum **must be on file with Department Headquarters** to be eligible for this award.
2. The reporting period is from May 1, 2025 – April 30, 2026. Any donations after this date must go on next year's report.
3. Include a narrative containing information or comments concerning the Sea Cadet activities of your Post such as:
  - a. Monies donated or spent on dinners, awards, supplies, dances, small arms, or anything else.
  - b. Activities the Post participated in, including Flag Disposal Ceremonies, Flag Day, Four Chaplains, Memorial Day, etc.
  - c. The signature of the Post Sea Cadet Chairman and the Post Commander must be at the end of the narrative.

**AWARDS ARE:** Best Post Sea Cadet Program (1st place) Runner-up (2nd place)

**MAIL SUBMISSION TO:** Florida American Legion  
P.O. BOX 547859  
Orlando, FL 32854-7859 Attn:  
Programs Director

**E-MAIL SUBMISSION TO:** [programs@floridalegion.org](mailto:programs@floridalegion.org)

***\*\*Nomination must be received no later than  
May 4, 2026\*\****



## Department Convention & End of the Year Awards Nomination Form

*Attach a one to two paged written narrative to this form*

**Deadline: May 4, 2026**

Title of Award: **BEST POST SEA CADET PROGRAM AWARD**

District#: \_\_\_\_\_ Post#: \_\_\_\_\_

Name of Sea Cadets Chair: \_\_\_\_\_

Name of Report Preparer: \_\_\_\_\_

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

Post Phone#: \_\_\_\_\_

Has post attached a one-two paged narrative  
report?

Yes      or      No

Has post submitted their National Consolidated  
Post Report AND Department CPR Addendum to  
the Department Headquarters?

Yes      or      No

Signature of Post Commander: \_\_\_\_\_

Signature of Report Preparer: \_\_\_\_\_

# NOMINATE YOUR POST SERVICE OFFICER FOR: **THE TRACY TAYLOR AWARD**

The “Unsung Hero” plaque is awarded to the Post Service Officer excelling in service work for veterans and their dependents.

This is one of the most prestigious awards a Service Officer can earn. It is truly symbolic of the highest traditions of The American Legion. The recipient can be justifiably proud of his/her contribution to the rehabilitation program of The American Legion.

Your Service Officer may qualify for consideration for this award by your submitting the required written narrative of his Post activities and achievements in serving needy, disabled and hospitalized veterans and their dependents.

The annual reporting period is May 1, 2025 - April 30, 2026. Please use the award form and return everything to Department Headquarters, Attn: Programs Director, PO Box 547859, Orlando, FL 32854-7859, or email [programs@floridalegion.org](mailto:programs@floridalegion.org).

A copy of your National Consolidated Post Report **and** Department Addendum must be on file with Department Headquarters to be eligible for this award.

Your Department Service Officer will screen all applications very closely and determine who shall be presented the TRACY TAYLOR award at the Annual Department Convention.

***\*\* DEADLINE – Received by May 4, 2026 \*\****



## Post Service Officer Tracy Taylor Award Form

*Attach a one to two (1-2) page written narrative to this form*

**Deadline: May 4, 2026**

Post#: \_\_\_\_\_ Name of Post Service Officer: \_\_\_\_\_

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

Phone#: \_\_\_\_\_

Signature of Post Commander: \_\_\_\_\_

Signature of Report Preparer: \_\_\_\_\_

Current Post Membership	
Number of cases with direct contact to Government Agencies on behalf of veterans (other than VA or Congressmen/ Senators)	
Number of interviews with claimants	
Number of hospitalized veterans that you helped (government or private)	
Number of claims referred to County Veterans Service Officers	
Number of veterans assisted with Education/ Employment	
Number of veterans' families assisted	
Number of veterans furnished transportation	
Number of visits to hospitals (government or private)	
Estimated number of hours devoted to service work	
Estimated number of miles traveled	
Last date certified as Post Service Officer	
How long have you been working with the Post as a Service Officer?	



# **NOMINATE YOUR POST FOR:** **THE WILSON TIMMONS MEMORIAL** **BEST ALL-AROUND POST AWARD**

This is the time of year we begin to take stock of our Post activities. Has your Post been active in Legion programs? Is there something your Post has done that merits particular recognition? Has your Post pulled together to make your community a better place to live? If your answer is “YES” you need to submit a report in the form of a narrative.

*Remember, the report to be judged is the narrative report given by the Post Commander at the District Constitutional Conference. It should be typed and placed in a folder. The report should be thorough, listing and describing your Post’s program activities for this program year only. No history books. Back-up materials may be included for reference purposes only. Send in this report even if your District Constitutional Conference is held after May 3rd.*

The reports received will be judged by a committee appointed by the Department Commander. The Post report judged by this committee as “The Best All Around Post” will be recognized at Department Convention.

A copy of your National Consolidated Post Report and Department Addendum must be on file with Department Headquarters to be eligible for this award.

**MAIL SUBMISSION TO:**

Florida American Legion  
P.O. BOX 547859  
Orlando, FL 32854-7859  
Attn: Programs Director

**E-MAIL SUBMISSION TO:**

[programs@floridalegion.org](mailto:programs@floridalegion.org)

***\*\* Received by Department Headquarters  
no later than May 4, 2026 \*\****



Department Convention & End of the Year Awards  
Nomination Form

*Attach a one to two (1-2) page written narrative to this form*

**Deadline: May 4, 2026**

Title of Award: **WILSON TIMMONS MEMORIAL AWARD –**  
**BEST ALL-AROUND POST**

District#: \_\_\_\_\_ Post#: \_\_\_\_\_

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

Name of Report Preparer: \_\_\_\_\_

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

Post Phone#: \_\_\_\_\_

Has post attached a one to two (1-2) page narrative  
report? Yes or No

Has post submitted their National Consolidated  
Post Report AND Department CPR Addendum to  
the Department Headquarters? Yes or No

Signature of Post Commander: \_\_\_\_\_

Signature of Report Preparer: \_\_\_\_\_

# **NOMINATE YOUR POST ADJUTANT FOR:** **THE MOST OUTSTANDING ADJUTANT'S** **AWARD**

Since individual Posts participate in various programs in their local community, the narrative reporting system will be the most beneficial. To recommend your Post Adjutant for this award, consider some of the following areas in your narrative:

1. Concise Post meeting minutes.
2. Certification of membership awards to the Department Headquarters.
3. Prompt transmittal of membership cards.
4. Prompt reporting of Post activities to the membership.
5. Coordination of Legion programs during the year.
6. Maintains good communications between officers and chairmen.
7. Initiates membership programs to maintain the Post membership.
8. Ensures the Post home is maintained properly.
9. Promotes community activities with other civic groups.

**NOTE:** If your Post Adjutant is paid by the Post as a full-time or part-time Adjutant, this must be stated in your report. If only expenses are compensated, this does not need to be reported. All Post Adjutants are eligible for this award.

A copy of your National Consolidated Post Report *and* Department Addendum must be on file at Department Headquarters to be eligible for this award.

***\*\* Received by Department Headquarters***  
***no later than May 4, 2026 \*\****



## Department Convention & End of the Year Awards Nomination Form

*Attach a one to two (1-2) page written narrative to this form*

**Deadline: May 4, 2026**

Title of Award: **MOST OUTSTANDING POST ADJUTANT AWARD**

Post #: \_\_\_\_\_ Name: \_\_\_\_\_

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

Phone#: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Continuous Years of Membership: \_\_\_\_\_

Positions held in the Legion: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Community Activities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What exemplifies this person as a Legionnaire? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is this person a leader in what he/she does? How? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does Legionnaire intend to aspire to higher positions within The American Legion?

\_\_\_\_\_

\_\_\_\_\_

Is this person well respected in his/her post and community? \_\_\_\_\_

Would you recommend this person for advancement in The American Legion? Why?

\_\_\_\_\_

\_\_\_\_\_

Submitted by: \_\_\_\_\_ Title: \_\_\_\_\_

# **NOMINATE A MEMBER FOR:** **LEGIONNAIRE OF THE YEAR AWARD**

Nominate a Legionnaire that has gone above and beyond their call of duty.

**Eligibility:** Member must be in good standing, shown community involvement, outstanding service within the post, has not held any office higher than District Commander, not a current Department, Area, or District Officer, has actively supported and participated in The American Legion programs, and exemplifies our motto, 'For God and Country'

**Submissions must include:** *Legionnaire of the Year Award Form* and a one to two (1-2) page narrative. Additional supporting documents can be added. Submission **cannot** be more than six (6) pages long.

**MAIL SUBMISSION TO:** Florida American Legion  
P.O. BOX 547859  
Orlando, FL 32854-7859  
Attn: Programs Director

**E-MAIL SUBMISSION TO:** [programs@floridalegion.org](mailto:programs@floridalegion.org)

***\*\* Received by Department Headquarters  
no later than May 4, 2026 \*\****



# Department Convention & End of the Year Awards Nomination Form

*Attach a one to two (1-2) page written narrative to this form*

**Deadline: May 4, 2026**

Title of Award: **LEGIONNAIRE OF THE YEAR AWARD**

Post #: \_\_\_\_\_ Name: \_\_\_\_\_

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

Phone#: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Continuous Years of Membership: \_\_\_\_\_

Positions held in the Legion: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Community Activities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What exemplifies this person as a Legionnaire? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is this person a leader in what he/she does? How? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does Legionnaire intend to aspire to higher positions within The American Legion?

\_\_\_\_\_

Is this person well respected in his/her post and community? \_\_\_\_\_

Would you recommend this person for advancement in The American Legion? Why?

\_\_\_\_\_

\_\_\_\_\_

Submitted by: \_\_\_\_\_ Title: \_\_\_\_\_