# "Of The Year" Award Check List

Name:	Award Applied for (Circle one): Fire Fighter / Law Officer / EMT
Has a completed cover sheet as approved by the Na included in the 18-page maximum)? Yes 1	· · · · · · · · · · · · · · · · · · ·
Is the applicant a citizen of the United States? Ye	s No
Is the applicant a certified, living, full-time, paid or Yes No Paid V	=
Is the applicant assigned to or fully recognized by a Federal office? Yes No	Municipal (City), County, District, State or
Does the applicant reside in or is attached for duty is selected? (Federal firefighters/agents serving in oververseas Department. Military firefighters are eligit they are state firefighter certified. Military police of	erseas Departments may be nominated by the ble for participation in this award provided
Will the applicant be available to attend The American for this award? Yes No	can Legion National Convention if selected
Necessary documentation:	
(1) a completed application form	
(2) a $5x7$ " photograph of the nominee	
(3) a maximum of 18 one-sided pages 8 1/2x 1	
first six or seven pages should contain the in	
	other documentation to include press articles
(4) Letter of recommendation by their supervisor	of the state of th
(5) Copy of federal or state certification	
(6) Copies of training certificates	

## Suggested documentation:

- Establishment of community service: volunteerism
- Leadership positions
- Specific acts of community service, heroism and meritorious performance recognized by his/her firefighter agency
- Letters of Recognition, news clippings,
- Community Awards
- Other substantiating documentation

Please check rules for explanations and full details.

### **South Dakota American Legion**

#### **EMT** of the Year

Subject: South Dakota American Legion "EMT of the Year" Award.

Purpose: The purpose of this award is to recognize outstanding Emergency Medical Technicians, including paramedics, for their service and dedication to the health, safety and wellbeing of our citizens. Recipients may be volunteers or paid members of a municipal (city) or County Medical emergency agency.

This memorandum and the policies contained herein are effective immediately for the selection the EMT of the Year.

Scope: Americans, especially since the tragic day of September 11, 2001, understand the heroism, bravery and importance of our nation's first responders and their role in helping to safeguard the wellbeing of our citizens. As concerned citizens and veterans, Legionnaires have always fostered a strong sense of support to first responders and have upheld the protection of American citizens and the American way of life. They have always held medical agencies in the highest regard, and many posts and departments already recognize outstanding EMT's of various jurisdictions who daily serve our communities and frequently lay their lives on the line.

Purpose: The purpose of this letter of instruction is to specify the guidelines, eligibility criteria, and application requirements for selection and presentation of the EMT of the Year Award. Our goal is to select a well-rounded EMT who has exceeded, above and beyond, the duty requirements expected of his/her position and had demonstrated a distinct pattern of community service coupled with professional achievement. Episodes of heroism will, of course, also be included where noted. A major secondary purpose of this award is to encourage the further development of post participation.

Award Designation: This award shall be known as "The South Dakota American Legion EMT of the Year" award and it will be presented annually at the Department convention or other suitable American Legion settings, as appropriate. All posts are encouraged to participate in this worthwhile and prestigious awards program. The American Legion will provide roundtrip vehicle mileage in accordance with its employee mileage reimbursement rates and lodging for one night in accordance with travel policies of The American Legion for an individual recipient. The American Legion will not provide for any incidental expenses or any expenses incurred by the recipient of this award.

#### **Guidelines for Posts:**

1. All Posts are urged to select a Post EMT of the Year before or during the Posts Department convention. Posts should submit their nominee's application to Department Headquarters at:

South Dakota American Legion P.O. Box 67 Watertown, SD 57201

- 2. The inclusive dates for this award will cover the calendar year January 1 through December 31.
- 3. It is desired that Posts select and submit their nominees so that postmarked applications are received not later than December 31<sup>st</sup> of each year.
- 4. Posts may submit only one nominee per year.
- 5. The resume and application for the nominee from each post must conform to the department criteria for judging as contained herein. The eligibility and criteria stated in this letter will be used to select the Department EMT of the Year.

Eligibility Criteria: To be eligible for consideration, nominees must meet the following criteria:

- 1. Be a citizen of the United States, male or female.
- 2. Be a certified living, active, full-time, paid, or volunteer EMT.
- 3. Be assigned to, or fully recognized by, Municipal (City), County, District, State or Federal EMT.
- 4. Be selected as the Post EMT of the Year.
- 5. Post nominees are not required to be veterans or members of The American Legion.
- 6. Reside and be assigned or attached for duty in the area of the Post from which they are selected.
- 7. Consideration for a posthumous award will be acceptable only if the nominee's death has occurred after the Post's selection and within the dates for which the award is being presented.

8. Nominees selected for this award should be available to receive this award at The South Dakota American Legion Department Convention.

Post Application Packets: Only one copy of the Post application packet needs to be submitted to the South Dakota American Legion Public Safety Committee. Post application packets for their nominee should include:

- 1. Application Form-Complete the attached application form and use it as the cover page of the application. This cover page shall not count as part of the maximum 18 pages of service documentation.
- 2. 5 x 7 official photograph of the nominee.
- 3. Service narrative and supporting documentation. The goal of the South Dakota American Legion Public Safety Committee is to select a well-rounded EMT who has exceeded, above and beyond, the duty requirements of his or her position and who exemplifies the virtues of professionalism and dedication and has demonstrated a distinct pattern of community service to his or her community, state or nation; and also, has proven his or her personal dedication to community service. The EMT must be recommended by his or her supervisor for this award. Specific acts of community service, heroism and meritorious performance recognized by his or her medical service agency should be included and documented. To assist the Department in their selections, judging guidelines at the Department level will be based on the following criteria, and maximum percentage points will be allocated as follows:

Community Service	35 points
Professional Career	40 points
Heroism	20 points
Letters of Recognition, news cl documentations	ippings and other substantiating

Community Service: Outstanding service to the community, state or nation by the EMT, in both on-duty and off-duty activities, should be explained for the past year and may include previous years. Cite, for example, awards and/or supporting letters from city or county commissioners, letters from state officials, and letters from The American Legion Posts, or from citizens attesting to and commending the EMT for his or her community service contributions. Remember, one of the major aims of the

award program is to select a well-rounded EMT who has demonstrated a distinct pattern of community service above and beyond assigned duty requirements.

Citations for community service, heroism and meritorious performance of duty should be explained for the past year and may include previous years. Include citations and any supporting letters from the officer's chain of command as well as other documentation from city, county, state authorities and American Legion officials, citizens or civic groups as further evidence of community service heroic and meritorious performance of duty by the officer.

Include a copy of your nominee's state or federal certification as EMT as well as copies of pertinent training and education certificates as appropriate.

The post which submits the winning nominee will be notified by the South Dakota Public Safety Committee as expeditiously as possible.

## **Application form for EMT of the Year**

Date		
Name	Sex	
Home Address	Phone	
City, State and Zip		
AgeMarital Status	Spouse's name	
Length of Service as EMT		
Agency Name		
Agency Director	Title	
Nominee's Supervisor	Title	
Agency Address		
City, State and Zip	Phone	
Post Submitting Nomination		
Post Commander	Post Adiutant	

Failure to use this form may result in the Disqualification of Your nominee. It should be placed as the COVER SHEET for your packet of materials supporting your candidate. Include an official photograph of the nominee.

Mail to: SD American Legion, PO Box 67, Watertown SD 57201