



Date: _____

Community Service - Al White Award

Post: _____

Address: _____

City: _____ State: _____ Zip: _____

Legion Family Entity: (TAL/ALA/SAL) _____

Criteria:

An award may be given each month to an American Legion Post, Unit, Squadron, or ALR, judged to have performed an outstanding Community Service project for the betterment of their community or the people therein.

An award may be given to any combination of the American Legion Family provided proper documentation is provided. Signatures must include that of the Post Commander and Adjutant as well as any other officers as required from the combined American Legion Family from that Post.

Narrative:

Please provide a narrative with proper documentation to include description of activities, proof of activities (pictures/newspaper articles) designed to enrich your Legion Family and/or your community.

Submission:

This form, with attachments must be submitted to:

DVC Scott M. Conner, Department Community Service Committee Chairman.
7 Meadowbrook Rd.
Spencer, MA 01562

Or Electronically to: smconner@charter.net

Application must be submitted within 45 days of event.

Submitted by: _____, Post: _____

All Entries will be judged by the Community Service Committee.
This annual award will be presented to the recipient during events of Opportunity.

Submitting Post must have current Consolidated Post Report. (Intl) _____

**Department of Massachusetts
Community Service Award
Al White Award**

Attach Narrative, Photos, Newspaper clippings.