



THE AMERICAN LEGION  
DEPARTMENT OF VERMONT  
ROBERT BERGERON ADJUTANT OF THE YEAR AWARD

NAME OF NOMINEE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

YEARS OF MEMBERSHIP: \_\_\_\_\_ MEMBER OF POST: \_\_\_\_\_

OFFICES/COMMITTEES HELD FOR CURRENT YEAR: \_\_\_\_\_

\_\_\_\_\_

REASON FOR SUBMISSION (please attach achievements for this year only.)

INDIVIDUAL SUBMITTING NOMINATION: \_\_\_\_\_

CONTACT INFORMATION: PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

WILL THE NOMINEE BE ATTENDING THE DEPARTMENT  
CONVENTION? \_\_\_\_\_ YES \_\_\_\_\_ NO

"THIS FORM MUST BE SUBMITTED TO: THE AMERICAN LEGION  
DEPARTMENT OF VERMONT, P. O. BOX 396, MONTPELIER, VT  
05601-0396, NO LATER THAN MAY 1ST."