



Arkansas Military Veterans'
Hall of Fame



Cover Letter

Date: _____

To: Arkansas Military Veterans' Hall of Fame

From: _____

Subj.: Checklist and Nomination Packet for _____ to be inducted into
the Arkansas Military Veterans' Hall of Fame.

I, _____ is submitting this Nomination Packet for _____
to be inducted into the Arkansas Military Veterans' Hall of Fame. The following items on the checklist
below will be included with this packet:

- Completed Cover Letter and Checklist _____
- Completed Nomination Form _____
- Discharge Orders _____
- High Resolution Photograph of Nominee _____
- Narratives of Gallantry, Highest Military Awards,
and Documents military and civilian accomplishments _____
- Letters of Recommendations _____
- Synopsis _____
- Summary of Achievements _____

Respectfully Submitted,

X
Nominator

FAILURE TO INCLUDE THIS COVER LETTER WILL RESULT IN A DISQUALIFICATION



**ARKANSAS MILITARY VETERANS'
HALL OF FAME, INC.
Office of the Selection Committee
P.O. Box 11011
Conway, AR 72034**



NOMINATION FORM

NOMINEE'S INFORMATION:

CATEGORY: Medal of Honor: _____ 1: _____ 2: _____ 3: _____
 Date of Application: _____ Is the Nominee Deceased? Yes _____ No _____
 First Name: _____ Middle Name: _____ Last Name: _____
 DOB: _____ Place of Birth: City: _____ State: _____
 Home Address: Street: _____ City: _____ State: _____ Zip Code: _____
 Home Phone: _____ Cell Phone: _____ Email: _____

	Location	Years	Location	Years
Arkansas Residency				

If Nominee is Deceased, Name, Address, and Phone Number of Person who is Accepting on Nominee's Behalf.

First Name: _____ Middle Name: _____ Last Name: _____
 Home Address: Street: _____ City: _____ State: _____ Zip Code: _____
 Home Phone: _____ Cell Phone: _____ Email: _____

NOMINATOR'S INFORMATION:

First Name: _____ Middle Name: _____ Last Name: _____
 Home Address: Street: _____ City: _____ State: _____ Zip Code: _____
 Home Phone: _____ Cell Phone: _____ Email: _____

NOTE: Only the nominator will be notified if this nominee is NOT selected.

AFFIDAVIT AND AUTHORIZATION

I hereby affirm that the information contained in this Nomination Package is accurate to the best of my knowledge and understanding, and in conformance with the Nomination Criteria and Guidelines.

I agree to provide information if requested by the Arkansas Military Veterans' Hall of Fame. I acknowledge that all provided photographs and documents will not be returned.

FAILURE TO SIGN AND INCLUDE THIS FORM WILL RESULT IN DISQUALIFICATION.

X

 Nominator
 Signature Required

For AMVHOF Official use Only:

Date Received:

Packet #:



Arkansas Military Veterans' Hall of Fame

Office of Public Relations
P.O. Box 11011
Conway, AR 72034



FOR IMMEDIATE RELEASE

To: All Media Outlets

From: Arkansas Military Veterans' Hall of Fame, Office of Public Relations.

Subj: Induction into Arkansas Military Veterans' Hall of Fame Press Release

The Arkansas Military Veteran's Hall of Fame has inducted the Following United States Military Veteran:

Full Name: _____ DOB: _____

Branch of Military Service: _____

Rank: _____ Years of Service: _____

Medals and Ribbons: _____

Summary Military or Civilian Accomplishments: _____

Places Where Inductee Has Resided: _____

Schools Inductee Attended: _____

Colleges Attended: _____

Degrees Received: _____

Organizations Inductee Belong To: _____

Thank you for supporting The Arkansas Military Veterans' Hall of Fame!