



**American Legion Auxiliary
National Report and Award Cover Sheet**

See the Annual Supplement to the Programs Action Plan to determine where to send this form.
Please note, your report will also be viewed as an award entry if this cover sheet is attached.

Complete the following if you are applying for a member award.

Unit #: _____ Full official unit name: _____

Name of state where you are a member: _____

Member's Full Name: _____ ALA member ID#: _____

Nominating Member (if different from above): _____

Nominator's Phone number: (____) _____

Nominator's Email address: _____

National committee sponsoring award: _____

Name of the award you are applying for: _____

For a unit award or to submit a year-end unit narrative report, please complete this section.
Be sure to give the complete name of your unit. The award certificate will be prepared using the information you include below.

Unit #: _____ Full official unit name: _____

Name of department: _____

Unit president/chairman (**circle one**) name: _____

Above listed person's ALA member ID#: _____ Phone number: (____) _____

Email address: _____

For a department award or to submit a year-end department narrative report, please complete this section:

Name of department: _____

Name of department chairman: _____

Chairman's phone number: (____) _____ ALA member ID#: _____

Chairman's email address: _____