

DEPARTMENT ADJUTANT'S ADMINISTRATIVE GUIDE



THE AMERICAN LEGION

2026-2027 Edition

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How to Use the Department Adjutant's Administrative Guide

The use of this guide provides for two-way communication regarding administrative matters pertaining to reports and programs.

The forms contained in this guide are now in portable document format (PDF's) on myLegion.org. The forms may be found in order of this guide on myLegion.org and may be downloaded to your desktop. After completion, of the fillable forms, they may be saved as a file and faxed or emailed directly to the division listed on each form.

This guide is divided into sections according to the month when the reports are due. A general section follows the monthly sections; this is used for information that does not apply to a specific month.

A table of contents precedes each monthly section for quick reference, and a monthly index is included to reference the forms in the monthly sections.

RODNEY K. ROLLAND
National Adjutant

National Headquarters Offices

Downtown Indy
700 N. Pennsylvania St.
Indianapolis, IN 46204
317-630-1200

Document Responsibilities

Americanism
Convention
Executive Office
Internal Affairs/Membership
 SAL (Sons of The American Legion)
Library
M&C (Media & Communications)

DC Office
1608 K Street NW
Washington, DC 20006
202-861-2700

Document Responsibilities

National Security
VA&R (Veterans Affairs & Rehabilitation)
VE&E (Veterans Employment & Education)

Geiger Operations Center (GOC)
5745 Lee Rd.
Indianapolis, IN 46216
317-860-3100

Document Responsibilities

Emblem Sales
IT (Information Technology)

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Annual Blood Donor Report Information Sheet

Purpose of Report: To provide data necessary for determining winners of two National Commander's Blood Donor Awards--one for the department with the highest percentage of post participation and the other for the greatest percentage of membership participation by departments.

Deadline: Submit by July 15 annually

Mail to: **The American Legion**
National Security Division
1608 K Street NW
Washington, DC 20006
Email: NS@legion.org
Phone: 202-861-3700

Submit one copy and retain one for your files.

Commander's Annual American Legion Blood Donor Award Form

Department: _____ Date: _____

Number of Posts Participating in Blood Program: _____

Number of Posts in your Department: _____

Number of Legionnaires Participating in Blood Program: _____

American Legion Holiday Blood Drive ☐ Yes ☐ No

Did your Department Participate Last Year? ☐ Yes ☐ No

Did your Department Participate This Year? ☐ Yes ☐ No

Name and address of your current Department Blood Chairman and/or Civil Defense:

Chairman: _____

Address: _____

Typed Name of Department Adjutant

Signature of Department Adjutant

NOTE:

Certificates of Recognition (Department and Post) and Blood Donor Tacks and Decals can be purchased through the National Emblem Sales Division, Email emblem@legion.org, or call 1-888-453-4466.

Please return your completed form by July 15 to:

National Security Division

The American Legion

1608 K Street NW

Washington, DC 20006

Email: NS@legion.org

***National Headquarters will figure the percentage
The annual Deadline Date is July 15th.**



Appointment of Assistant Sergeants-at-Arms For National Convention

Each year, approximately 100 Legionnaires attending the National Convention act as Assistant Sergeants-at-Arms during the Convention sessions. The National Commander desires that each Department be represented among this group, if possible.

The Convention budget makes no provision for payment of any expense in connection with this assignment. Therefore, selection should be made from among those to be present at the National Convention. Those selected must attend an instructional meeting conducted by the National Sergeant-at-Arms. This meeting will be held at 8:00 a.m. on the Monday prior to the beginning of National Convention General Sessions. Instructions will be mailed prior to this date and will contain room information.

If you have Legionnaires to recommend for this assignment, please submit their name and membership ID number via email to the National Commander's Assistant at pjackson@legion.org by July 31. A letter of appointment from the National Commander will then be sent to each nominee using the address listed on their membership record.

A handwritten signature in black ink, appearing to read "R K R", with a large, sweeping flourish extending from the end.

RODNEY K. ROLLAND
National Adjutant



Certification of Appointments to National Convention Committees

Department Adjutants: The **Uniform Code of Procedure for the Organization of National Conventions** outlines the following requirements

Delegate Designation and Submission

- Each department must designate **delegates or alternates** to serve on each convention committee.
- Designees must be reported to the **National Adjutant at least two weeks prior** to the opening session of the national convention.
- By action of the NEC, departments are **strongly encouraged** to select delegates who are both **qualified and committed** to fully participating in their assigned committee's work.

Notification of Delegates

- Departments are responsible for **notifying their designees** and including the **time and place** of the initial committee meetings in the convention city.
- **Suggested wording** for this notification and the **schedule of committee meetings** are attached for your reference.

Reporting Process

- The required "**Convention Committee Representatives Form**" is available online at myLegion.org.

Instructions:

1. Open the form and **enter delegate names** in the appropriate committee boxes.
2. **Save** the completed file.
3. **Email** the saved form to: TALforms@legion.org

⚠ Important: Do **not** change the format of the form. The data is directly copied into files used to generate committee roll calls.

- **Submission Window:**

Do not submit before June 9 ♦ ♦ Final deadline: August 16

Timely submission is essential to ensure accurate and complete preparation before arriving at the convention city.

Substitution of Delegates

- Departments may substitute committee members, provided **proper credentials** are submitted and approved.

Proper credentials include:

- A **signed letter** from the department adjutant detailing the change.
- This letter must be **presented to and signed by the National Adjutant** before the substitute delegate may be seated.

The National Adjutant will be available for credential approval:

- **Friday – All day ♦ ♦ Saturday – All day ♦ ♦ Sunday morning – Prior to/during committee meetings**

Once approved, credentials should be **filed with the committee liaison or secretary** to ensure inclusion on the roll call.

! Note: Liaison representatives may **not seat** a substitute delegate without signed and approved credentials.

Convention Weekend Contact

Please ensure that you are **reachable by cell phone on Sunday morning** at the convention in case clarification is needed regarding your department's representatives.

RODNEY K. ROLLAND
National Adjutant

[SAMPLE EXAMPLE]

[Department Letterhead or Return Address]

Mr. John Doe
123 Main Street
Indianapolis, Indiana 46204

Dear John,

You have been assigned as our department's representative on the **Americanism Convention Committee** at this year's national convention. This committee will meet on **Sunday, August [XX]**. Please refer to the enclosed "**Convention Committee Meeting Locations**" sheet for the exact time and location of your meeting.

As a reminder, there is **no national reimbursement** for your attendance at this meeting, as you are representing our department.

Please do **not confuse** the Sunday convention committee meetings with any **commission or other committee meetings** that take place on Saturday. The meeting referenced in this letter is specifically scheduled for **Sunday, August [XX]**.

We appreciate your willingness to serve. You will be asked to provide a brief report at our delegation's next caucus following the meeting.

Sincerely,

[Your Name]
[Your Title]
[Department Name]

Enc.



The American Legion

Consolidated Post Report (CPR)

And

Consolidated Squadron Report (CSR)

online memo



Consolidated Post / Squadron report forms are located on the national website at:

Consolidated Post Report (CPR)

[Home > Information Center > In the Media > Publications > Organization, Membership & Awards Publications](#)

And

Consolidated Squadron Report (CSR)

[Home > About The American Legion > American Legion Family > Sons of The American Legion > Publications and Forms](#)

Both the CPR and CSR are due to national by **July 1** for awards consideration at national convention. Late submissions of CPR and CSR are still encouraged through the month of August but will not be credited towards department awards.

Commanders and Adjutants have the ability to submit the CPR and CSR via MyLegion.org. Completed printed forms should be submitted to the department and detachment with a scanned copy sent to national at: CPRandCSRforms@legion.org.

Questions: Contact National Headquarters via (email) at IA@legion.org or via (phone) at 317-630-1326.



Daniel J. O'Connor Americanism Trophy Competition Transmittal of Narrative Statement Information Sheet

The Daniel J. O'Connor Americanism Trophy is awarded annually to that department selected from among the top three departments attaining the greatest number of percentage points derived from the Americanism activities reported on the Consolidated Post Report (CPR) form encompassing the previous 12-month reporting period of June 1st through May 31st, and which submits the best narrative statement supporting the claim of points shown.

To enter the annual Daniel J. O'Connor Americanism Trophy competition, a department must submit a narrative statement each year of not less than 200 words, nor more than 500 words, supporting the Americanism activities/points reflected on that department's CPR form encompassing the previous 12-month reporting period of June 1st through May 31st (many departments assign this responsibility to the department Americanism chairman).

The narrative must reach the Americanism Division at National Headquarters no later than July 15th annually and may be submitted using one of the following methods:

Mail: The American Legion
Attn: Americanism Division – O'Connor Award
PO Box 1055
Indianapolis, Indiana 46206-1055

Fax: 317-630-1369

Email: Americanism@legion.org



Department Children & Youth Report
The American Legion
(June 1 – May 31 Annually)

DEPARTMENT OF: _____ **YEAR(S):** _____

PURPOSE: This form allows departments opportunity for enhanced, consolidated reporting on assistance provided to children and youth by levels **other than** posts (e.g., district, county, area, department) that are not captured through regular Consolidated Post Reporting (CPR) by individual posts.

INSTRUCTIONS: Prior to May 31, each Post in your Department will receive a copy of the Consolidated Post Report form. All Consolidated forms are to be sent through your Department to National Headquarters. All narrative forms should be sent to you in care of your Department Headquarters.

It is your responsibility as Department Children & Youth Chairman to see that the requested Department expenditures are listed below and that all narrative report forms are tabulated and entered in Part II of this form. When completed, this form should be sent directly to: The American Legion, ATTN: Children & Youth, P.O. Box 1055, Indianapolis Indiana 46206-1055. Fax: (317) 630-1377 E-mail: childrenandyouth@legion.org

Deadline: July 1 Annually

PART I
GENERAL INFORMATION

Number of posts in department:	
Name of person making this report:	
Title:	
Address:	
City:	
State & Zip Code:	

PART II
INFORMATION FROM POST NARRATIVE REPORT FORM

The following information is to be tabulated from your department's own Children & Youth Post narrative report forms that are received by the Department Children & Youth Chairman.

A. Number of Posts filing a Consolidated Post Report form:	
B. Number of Posts participating in any of the following National Children & Youth program objectives:	
1) April is C&Y Month:	
2) Youth Suicide Prevention:	
3) Drug and Alcohol Abuse Education:	
4) Halloween Safety:	
5) Child Health & Safety:	
6) Temporary Financial Assistance:	
7) National Family Week/Family Emphasis:	
8) Family Support Network:	

C. Number of estimated volunteer service hours provided by the membership of posts in your department for children and youth:	
D. Amount of estimated money spent for administrative expenses for C&Y overhead (postage, printing, conference):	

PART III CHILDREN & YOUTH EXPENDITURES DEPARTMENT

These are funds expended by levels of the department other than posts for the Committee/Commission on Children & Youth; DO NOT reflect expenditures of posts.

SECTION A — DIRECT AID

Cash aid given to needy children	1)
Value of goods given to children (reasonable estimate)	2)
TOTAL DIRECT AID (Add lines 1 and 2)	3)

SECTION B — CONTRIBUTIONS TO

American Legion Child Welfare Foundation	4)
--	----

SECTION C — CONTRIBUTIONS TO

Miscellaneous Other C&Y Programs	5)
All others sum total	6)
TOTAL CONTRIBUTIONS (Add lines 5 through 6)	7)

SECTION D — EXTRAS

Cost of parties, gifts, similar extras	8)
--	----

SECTION E – MISCELLANEOUS

Cost of any other activities for children and youth	9)
TOTAL CHILDREN & YOUTH EXPENDITURES (Add lines, 3,4,7, 8 and 9)	10)

Please estimate the amount of money spent for administrative expenses for the department's Children & Youth overhead. (postage, printing, conferences. travel, salaries, etc.)

\$ _____

PART IV CHILDREN AND FAMILIES AIDED DEPARTMENT

These are the number of children aided through levels of department other than posts for the Committee/Commission on Children & Youth; DO NOT reflect the efforts of posts.

SECTION A — DIRECT AID

No. of children helped by cash grants	11)
No. of children given food, clothing, etc.	12)
TOTAL NUMBER OF CHILDREN DIRECTLY AIDED (Add lines 11 and 12)	13)

SECTION D — EXTRAS

No. of children given parties, gifts, similar extras	14)
--	-----

SECTION E — MISCELLANEOUS

No. of children reached through other activities	15)
TOTAL NUMBER OF CHILDREN (Add lines 13, 14 and 15)	16)

PART V

Use additional sheets to describe in some detail a special Children & Youth activity promoted by your department. If submitting online, please use the text box below to detail your special activity.

Date: _____

Signature _____

DEPARTMENT OFFICER CERTIFICATION OF SERVICE FORM

Pursuant to the action at the 2022 October meeting of the National Executive Committee of The American Legion, every officer of The American Legion must provide satisfactory evidence of their honorable service during a prescribed timeframe thereby establishing one's eligibility for membership in The American Legion.

This certification is carried out as follows:

(a) Eligibility documents of post officers submitted and certified by their post adjutant with notification to their Department Adjutant.

(b) Eligibility documents of department officers submitted and certified by their department adjutant with notification to the National Adjutant.

(c) Eligibility documents of national officers, National Executive Committee members, Alternate National Executive Committee members, commission and committee chairman submitted to the National Judge Advocate for an initial review, certified by the National Adjutant and reported to the National Executive Committee.

The form for providing certification of eligibility of department officers described above is attached. It is recommended department adjutants create a similar form and submit it to all posts in your department for their use in certifying eligibility of post officers to department headquarters.

Newly elected department officers should be reported to National Headquarters as soon after their election as possible.

If some department officers are elected or appointed by the DEC at some time after the department convention, **send the information of the officers elected or appointed by the department convention without waiting until a complete list can be supplied.** In this situation, note on the form on the appropriate lines the offices which will be reported after a specified date. Then, after the election or appointment of these officers has been completed, send a supplementary report.

**SUBMIT VIA EMAIL TO LIBRARY@LEGION.ORG IMMEDIATELY FOLLOWING
DEPARTMENT CONVENTION**



**Mark C. Seavey, J.D.
National Judge Advocate**

**DEADLINE IS AUGUST 15TH.
PER THE NATIONAL ADJUTANT, REMINDERS WILL NO LONGER BE SENT.**

Certification of Eligibility for American Legion Department Officers

(NOTE: Original forwarded to Library (library@legion.org) with a copy retained by Department Adjutant.)

DEADLINE IS AUGUST 15TH. PER THE NATIONAL ADJUTANT, REMINDERS WILL NO LONGER BE SENT.

Date _____

Pursuant to the action of Resolution No. 6 from the October 12-13, 2022 meeting of the National Executive Committee of The American Legion in Indianapolis, Indiana I have examined the service record of each of the following officers who have been duly elected or appointed to serve the Department of _____ for the year 20____ to 20_____.

	Name	Effective Date of Election or Appointment	Member ID#	Proof of Service* (Attached)
Commander				
Vice Commander				
Vice Commander				
Vice Commander				
Vice Commander				
Vice Commander				
Adjutant				
Acting Adjutant				
Natl Exec Cmte Member*		Dates set by the Natl Constitution		Required *
Alternate NEC *		Include exceptions in name field		Required *
Historian				
Chaplain				
Finance Officer				
Judge Advocate				
Sergeant-at-Arms				

I hereby certify that each of the above officers are eligible for membership in The American Legion.

***REQUIRED-Unless previously provided.**

(Signed) _____

DUPLICATE FORM AS NECESSARY

Department Adjutant

July 1, 2026

To: Department Adjutants

From: Rodney K. Rolland, National Adjutant

Subject: Certification of Eligibility for American Legion Department Officers

In the past, we have not received the Department Officer Certification of Service form in a timely manner from some departments, which creates challenges for us when it comes to dealing with current department officers and incoming NEC.

To avoid these challenges, we will institute a deadline of August 15 for receipt of your department's form. **Please note: Reminders will no longer be sent.** By not submitting your form in a timely fashion, you may risk your NEC's name not being included on the Post-Convention NEC roll call or your department officers not being certified as eligible by the National Judge Advocate.

In May, my office requested the names of your department commander, NEC, and Alternate NEC, to begin our future Legion year preparation. Please note that providing this advance information to us does not obviate the requirement that you officially certify your officers to the National Judge Advocate by submitting to us the Department Officer Certification of Service form. Thank you.

A handwritten signature in black ink, appearing to be 'RKR' with a large loop at the end.

RODNEY K. ROLLAND
National Adjutant

**NATIONAL EXECUTIVE COMMITTEE
OF
THE AMERICAN LEGION
October 12-13, 2022
Indianapolis, Indiana**

**Resolution No. 6: Officer and Chairman Certification of Service Update
Origin: Internal Affairs Commission
Submitted by: Internal Affairs Commission**

WHEREAS, The Certification of Service Record of American Legion Officers has been in effect since October 20, 1931 pursuant to Resolution No. 591 adopted by the Thirteenth National Convention in 1931; and

WHEREAS, It is advisable to update the recommendations of Resolution No. 5 (NEC, May 9-10, 2018); now, therefore, be it

RESOLVED, By the National Executive Committee of The American Legion in regular meeting assembled in Indianapolis, Indiana, on October 12-13, 2022, That within 30 days of induction into office, every national officer and national chairman of The American Legion must provide satisfactory evidence of honorable military service proving eligibility for membership in The American Legion, as follows, provided that such eligibility has not previously been presented to the national organization:

- (a) Eligibility for American Legion membership of post officers will be certified by their post adjutant with notification to their department adjutant; and**
- (b) Eligibility for American Legion membership of department officers will be certified by their respective department adjutants with notification to the national adjutant; and**
- (c) Eligibility for American Legion membership of national officers, National Executive Committee members, Alternate National Executive Committee members, commission chairmen and committee chairmen, after an initial review by the national judge advocate, will be certified by the national adjutant and reported to the National Executive Committee; and, be it further**

RESOLVED, That any member with aspirations of future national leadership in The American Legion may, at any time, submit one's proof of eligibility for American Legion membership to the office of the national judge advocate; and, be it finally

RESOLVED, That Resolution No. 5 (NEC, May 9-10, 2018) is hereby superseded and rescinded.



District/County Commander Questionnaire

Membership Year: _____

Last Name:	First Name & MI:
Street Address:	City/State/Zip:
Home Phone:	Email Address(es):
Member ID Number:	Post Number:
District/County:	Department:
Occupation:	Date of Birth:
Dates of Active Duty:	Branch of Service:
Spouse's Full Name (if married):	
Membership in other organizations:	
Write your own short personal goal as District or County Membership:	
Comments or Suggestions:	

Complete and submit the form online through the Personify (PGo) membership system or return completed form(s) to:

The American Legion
Internal Affairs & Membership Division
PO Box 1055
Indianapolis, IN 46206
E-mail: membership@legion.org
Fax: (317) 630-1413

RETURN WITHIN TWO WEEKS AFTER ELECTIONS



DISTRICT AND/OR COUNTY OFFICERS REPORT INFORMATION SHEET

Purpose of Report: To report to National Headquarters the names and contact information of District or County Commanders and/or Adjutants for the coming year.

Report Date: Either complete through Personify (PGo) membership system or mail soon after the election of the District or County Commanders. Normally, this should be no later than July 31.

E-mail or Mail To: **The American Legion**
 Internal Affairs & Membership Division
 PO Box 1055
 Indianapolis, IN 46206
 Email: membership@legion.org
 Fax: 317-630-1413

Report form follows – Return an original and copy to National.

In some Departments, the District Officers serve multiple-year terms. If the District Commander and/or Adjutant for the coming year is a holdover from the previous year, you should still report his/her name and contact information.

Accuracy in the spelling of names and reporting addresses is important since the lists will be used for mailing letters from the National Commander, preparing citations, addressing the *DISPATCH*, etc.

**SUBMIT BY E-MAIL OR HARD COPY AS SOON AS
COMMANDERS/ADJUTANTS ARE ELECTED**

DUPLICATE FORM AS NECESSARY



DISTRICT AND/OR COUNTY OFFICERS REPORT FORM

The following District or County Commanders and/or Adjutants will take (took) office on _____, 20____ for the _____ membership year.

Check one: ☐ Commander ☐ Adjutant	For District # or County:
Outgoing Officer's Name:	ID #:
New Officer's Name:	ID #:
Address:	City/State/Zip:
Home Phone #:	Cell Phone #:
Email:	
Check one: ☐ Commander ☐ Adjutant	For District # or County:
Outgoing Officer's Name:	ID #:
New Officer's Name:	ID #:
Address:	City/State/Zip:
Home Phone #:	Cell Phone #:
Email:	
Check one: ☐ Commander ☐ Adjutant	For District # or County:
Outgoing Officer's Name:	ID #:
New Officer's Name:	ID #:
Address:	City/State/Zip:
Home Phone #:	Cell Phone #:
Email:	
Check one: ☐ Commander ☐ Adjutant	For District # or County:
Outgoing Officer's Name:	ID #:
New Officer's Name:	ID #:
Address:	City/State/Zip:
Home Phone #:	Cell Phone #:
Email:	

Department

Department Adjutant's Signature

Date

THE FOLLOWING FOUR PAGES
INCLUDE INSTRUCTION
SAMPLES OF CONVENTION RESOLUTIONS
AND PROCESSING INFORMATION.

THE NATIONAL HEADQUARTERS LIBRARIAN
WILL MAIL THIS INFORMATION TO ALL
DEPARTMENT ADJUTANTS ANNUALLY
IN MAY.

THIS INFORMATION IS SUPPLIED IN THIS FORMAT FOR
INFORMATION PURPOSES ONLY

[The following is a copy of the email instructions for submitting resolutions for the National Convention. This covers the email template that you will have received around May 15.]

**Template for Department Resolutions
2026 National Convention – Louisville, Kentucky**

Dear Department Adjutant:

With this email is a template created using Microsoft Word. Please use the template so that your submission of resolutions for the National Convention can be easier, more economical, and more quickly processed. This procedure has worked very well in the past.

When finished typing the text of your resolution, double-click in the area at the bottom of the form (in the footer) and add your name and department. Please include your department in the file name (e.g. TX1, with the second Texas file named TX2). I suggest saving the file(s) to your hard drive.

Please send the resolutions as they are completed at the end of your workday. There is no need for them to be held back and sent to National Headquarters all together at the same time.

Please send the file(s) to National Headquarters via email **To:** rrolland@legion.org and copy library@legion.org.

You will receive an acknowledgement as soon as it is read via email and a copy of the resolutions will be sent to you in a few days.

If there are any problems, please contact Howard Trace at (317) 630-1356 or library@legion.org.

Please complete the resolution transmittal form to ensure all resolutions are accounted for.

Any department adjutant who would like to receive the file as a paper copy instead of an email attachment will be able to request it.

Sincerely,

A handwritten signature in black ink, appearing to read 'RKR', with a large, sweeping flourish extending from the end.

Rodney K. Rolland
National Adjutant

TO: Howard Trace, Liaison to the National Convention Resolutions Assignment Committee
The American Legion National Headquarters, Indianapolis, Indiana

FROM: **DEPARTMENT ADJUTANT OF** _____

RE: **TRANSMITTAL OF NATIONAL CONVENTION RESOLUTIONS FORMS**

Enclosed are [] resolutions adopted by the department which are to be referred by the National Convention Resolutions Assignment Committee to the proper convention committee at the 107th National Convention of The American Legion to be held in Louisville, Kentucky on September 1, 2, 3, 2026. An additional [] resolutions will be forthcoming. After proper assignment, please forward to us a copy of all resolutions submitted, indicating the number, title, and committee assignment.

DEPARTMENT ADJUTANTS - PLEASE NOTE

1. Only one copy of each resolution should be reviewed for errors and returned to National Headquarters as error free as possible. Only the form sent to you by National Headquarters for the upcoming National Convention is to be used. We encourage you to use the resolution form computer file template that is sent to you via email instead of printing the resolution on paper. We would like to see each resolution sent to National Headquarters via email as an attachment.
2. All regulations on the last page of the resolution form should be observed in full. The correct resolving clause (using the convention business session dates - those at the top of the resolution form) follows.

RESOLVED, By The American Legion in National Convention assembled in Louisville, Kentucky, September 1, 2, 3, 2026, That —

If the resolving clause is not stated as above, it necessitates the rewriting of the resolution.

3. Each resolution form and any subsequent pages submitted on paper must be signed with the department name typed next to the adjutant's signature. If the email version is submitted via the Internet, the name of the adjutant and the department must be added at the bottom of the form in the template area by double clicking; a signature is not required.
4. **Do not fill in the resolution number, subject, or referred to committee** that is found at the top of the form.
5. **Only if using a paper resolution form:** use additional official forms for extra pages, numbering each page and stapling together as one set. Do not use any forms from a previous year's convention.
6. Resolutions are to be sent to the attention of the national adjutant as soon as possible following the close of your Department Convention. Much time is involved in processing the many resolutions for the National Convention—thus our request for an early transmittal.
7. In accordance with the National Constitution and By-Laws, constitutional amendments must be forwarded to the National Adjutant in sufficient time to reach him by August 1, 2026. All other National Convention resolution forms must reach him by August 18, 2026.
8. Resolutions that do not reach us in time to process for National Convention may be resubmitted by the department adjutant to the National Executive Committee using the NEC template form.
9. The National Convention Resolutions Assignment Committee may return through and with the consent of the secretary of the National Convention to the source, inappropriate or non-germane resolutions that may be resubmitted, when corrected, to the National Executive Committee or National Convention by the originator. Inappropriate or non-germane resolutions include, but are not limited to: Convention resolutions (1) containing more than one subject, (2) calling for or requiring the expenditure of funds, (3) containing personal attacks or derogatory characterizations, (4) outside the purview, (5) not pertinent or inappropriate for action by the National Convention or (6) unclear and undocumented. Deficient resolutions, once corrected, in order to be reconsidered, need to be resubmitted to the National Convention or National Executive Committee as provided in the National Constitution and By-Laws.

RESOLUTION
National Headquarters, The American Legion
One-Hundred and Seventh Annual National Convention, Louisville, Kentucky
September 1, 2, 3, 2026

RESOLUTION NO.

SUBJECT:

REFERRED TO COMMITTEE ON

This is to certify that this resolution was adopted by our department but with national action substituted for local resolving clause.

Adjutant

Department

Other authorized source:

(To be used when resolution is submitted from another authorized source or to comply with Resolution 21, May 4-5, 2016)

BELOW THIS LINE FOR NATIONAL CONVENTION COMMITTEE USE ONLY

Approved

Approved with Amendment

Rejected

Received and Recorded

Consolidated with

Referred to Standing Commission or Committee on

Other Action

Signature of Chairman or Secretary

REGULATIONS

Based on the Uniform Code of Procedure for the Organization of National Conventions of The American Legion, adopted by the National Executive Committee at its October 1956 meeting, the following regulations have been established for the procedure of Convention Resolutions:

1. Each must emanate from a department after favorable action or from the National Executive Committee, or from any convention standing or special committee. Resolutions submitted in advance of the convention by departments and the National Executive Committee shall be filed with the national adjutant, who shall refer them to the National Convention Resolutions Assignment Committee.
2. The national adjutant shall maintain a convention register of all resolutions received, assigned and processed which shall identify each resolution by number, indicating the committee to which the resolution was referred and the originating source.

In submitting resolutions, the following points should be carefully observed:

- a. A resolution shall deal with only one subject. Do not attempt to deal with more than one subject in the RESOLVING clauses.
- b. All local RESOLVING clauses are to be omitted, substituting therein a clause resolving national action, i.e. the resolution as submitted should be worded for the National Convention as follows:

RESOLVED, By The American Legion in National Convention assembled in Louisville, Kentucky, September 1, 2, 3, 2026, That —

If the resolving clause is not stated as above (using convention business session dates) it necessitates having to re-write the resolution to show the proper resolving clause.

- c. Each resolution is to be worded in full, including all WHEREAS clauses as well as the RESOLVING clauses.
- d. Each resolution is to be signed in black ink and the originating source clearly typewritten or indicated, unless it is submitted as a computer file. Then the originating source is to be placed in the footer of the form.
3. In accordance with Resolution No. 21, adopted by the National Executive Committee in regular meeting assembled on May 4-5, 2016, each resolution should be supported by the identification of the individual or group originating the resolution, and also by a written statement or brief containing the supporting arguments in favor of the action sought, and clearly establishing the material relevance of the subject to the purpose for which The American Legion was formed.
4. In accordance with Resolution No. 50, adopted by the National Executive Committee in regular meeting assembled on May 5-6, 1965, resolutions adopted by departments and destined for consideration by the National Convention shall be forwarded to the national adjutant, to be in his hands fourteen (14) days prior to the opening session of the National Convention. The only exception to this provision shall be in instances where Department Conventions are held at such time that it becomes physically impossible to comply with this provision, in which instances, the resolutions shall be forwarded to the national adjutant immediately upon the adjournment of the Department Convention.
5. The National Convention Resolutions Assignment Committee may return through and with the consent of the secretary of the National Convention to the source, inappropriate or non-germane resolutions that may be resubmitted, when corrected, to the National Executive Committee or National Convention by the originator. Inappropriate or non-germane resolutions include, but are not limited to: Convention resolutions (1) containing more than one subject, (2) calling for or requiring the expenditure of funds, (3) containing personal attacks or derogatory characterizations, (4) outside the purview, (5) not pertinent or inappropriate for action by the National Convention or (6) unclear and undocumented. Deficient resolutions, once corrected, in order to be reconsidered, need to be resubmitted to the National Convention or National Executive Committee as provided in the National Constitution & By-Laws.

2026-2027 MEMBERSHIP RENEWAL SCHEDULE

CUTOFF DATES

MAY 13, 2026

SEPTEMBER 9, 2026

OCTOBER 14, 2026

DECEMBER 9, 2026

FEBRUARY 10, 2027

APRIL 14, 2027

RENEWAL MAIL DATES

JULY 1-8, 2026

OCTOBER 3-9, 2026

NOVEMBER 7-13, 2026

JANUARY 2-8, 2027

MARCH 2-9, 2027

MAY 1-7, 2027

Transmittals not received by the cutoff date may not prevent a subsequent renewal notice from being delivered at or around the renewal date.

Please note, renewals transmitted and received by the cutoff (which is also a National Target Date) will be updated prior to printing renewal notices, assuming they can be successfully scanned. Membership that must be hand-keyed (new members and renewals that can't be scanned) will take longer to process. Please transmit as early and as often as possible in advance of the Target Dates to help avoid delays in processing.

2026 - 2027

NATIONAL MEMBERSHIP TARGET DATES

EARLY BIRD/NEF KICKOFF	SEPTEMBER 10, 2026	50%
FALL MEETINGS	OCTOBER 14, 2026	55%
VETERANS DAY	NOVEMBER 12, 2026	65%
PEARL HARBOR DAY	DECEMBER 9, 2026	75%
MID-WINTER	JANUARY 13, 2027	80%
PRESIDENT'S DAY	FEBRUARY 10, 2027	85%
LEGION BIRTHDAY	MARCH 10, 2027	90%
CHILDREN & YOUTH	APRIL 14, 2027	95%
ARMED FORCES DAY	MAY 12, 2027	100%
DELEGATE STRENGTH	30 DAYS PRIOR TO NATIONAL CONVENTION	

Target dates fall on the second Wednesday of the month unless there is a holiday on that day or at the beginning of that week in which case the target date is that Thursday.

An additional week is provided to departments in October due to Fall Meetings.

Paul H. Griffith Annual ROTC Trophy Information Sheet

Purpose of Report: To provide necessary data to determine an annual winner of the Paul H. Griffith ROTC Trophy. The trophy will be awarded annually to the Department of The American Legion, which supports the ROTC programs of the military services.

Judging will be based on the percentage of American Legion ROTC medals provided compared to the total number of ROTC units (high schools, colleges, and universities) in the state. All medals awarded between July 1 of the previous year and June 30 of the current year should be included in the report. American Legion representatives' participation in Award Day ceremonies also earns credit in the judging. Additional credit may be gained by indicating any Department scholarship or award initiatives that further ROTC goals.

Deadline: July 15 annually

Mail to: National Security Division
1608 K Street NW
Washington, DC 20006
Email: NS@legion.org
Online via www.MyLegion.org

Please retain a copy for Department records.

PAUL H. GRIFFITH ANNUAL ROTC TROPHY REPORT FORM

Department: _____

Date: _____

Number and types of ROTC medals presented by your department and/or post during the reporting period to schools, colleges, and universities located in your state:

Types:	No:

Awards

General Military Excellence Award:

☐ Gold

☐ Silver

☐ Bronze

Scholastic Excellence Award:

☐ Gold

☐ Silver

☐ Bronze

Total number of ROTC units to which these medals were presented:

High Schools:	Colleges/Universities:

Total number of occasions American Legionnaires participated in Award Ceremonies:

High Schools:	Colleges/Universities:

Department Adjutant Printed Name

Department Adjutant Signature

NOTE: This report should include all medals awarded and participation by American Legion representatives between July 1 of the previous year and June 30 of the current year.

Please return your completed form by July 15 to the National Security Division, The American Legion, 1608 K Street, NW Washington, DC 20006, or email NS@legion.org.

DUPLICATE FORM AS NECESSARY

2026 Post History Showcase and Department History Contest

In 2026, as approved in NEC [Resolution No. 20](#) (Fall 2023), hard copy and digital post histories will be shared in a showcase while a digital department history contest will be held. Standards for submissions for the department history contest can be found in the 2026 Historian's Guide at [2026 Contest and Showcase Information](#).

Departments will be able to submit:

- **One (1) digital department history for the contest** (these entries will be judged and showcased on the online exhibit)
 - Entry is limited to a single PDF file not to exceed 100MB in size (smaller files are preferred).
 - Deadline: August 1, 2026
- **One (1) hard-copy post history for the showcase** (these entries will be showcased at National Convention)
 - Entry should be sent to National Headquarters to the attention of the national historian.
 - Deadline: August 7, 2026
- **One (1) digital post history for the showcase** (these entries will be showcased on the online exhibit)
 - Entry is limited to a single PDF file not to exceed 100MB in size (smaller files are preferred).
 - Deadline: August 7, 2026

All submissions (hard copy and digital) must be certified by the department adjutant using the online submission form.

Details for submissions, including log in and certification instructions are provided directly to department adjutants via communication from the national historian.

Please remember:

- Only department adjutants can access and upload material to the entry submission website.
- Digital submissions are to be a single PDF file not to exceed 100MB in size (smaller files are preferred).
- Once a submission is successfully entered the department adjutant and national staff will receive an email confirmation.
- Each department may enter one hard-copy post history and one digital post history for the showcase, and one digital department history for the contest.

For further assistance, please email the Library Division at library@legion.org.



SONS OF THE AMERICAN LEGION 100% SQUADRON HONOR RIBBON REQUEST FORM

Pursuant to Resolution NC 276, Procedure for Awarding 100% Squadron Honor Ribbons. "A Squadron equalling or surpassing its previous year's membership at any time shall be qualified to be the SAL 100% Squadron Honor Ribbon" awarded to squadrons that have matched or exceeded the previous year's membership by July 1 of each year."

The number of Ribbons needed: _____

Mail to Address (if different from Dept HQ):

_____ Department

Certification:

By signing below, either physically or electronically, I confirm that the squadrons listed in this request have achieved 100% or more of their prior year's membership by the designated deadline.

Department Adjutant

Type First and Last Name to serve as digital signature

Date _____

Format: mm/dd/yyyy / (select date by clicking inside above)

Completed award forms can be submitted using one of the following methods:

The American Legion
Attn: SAL Awards
700 N. Pennsylvania Street
Indianapolis, IN 46204
Phone: 317-630-1205
Email: SALawards@legion.org
Deadline: N/A

REVISED: APR / 2026

**DEPARTMENT OF VETERANS AFFAIRS
HEALTH CARE PROVIDER OF THE YEAR AWARD
Information Sheet**

This Award Program permits The American Legion to honor any healthcare provider that is not a VA physician, who has provided extraordinary service to our Nation's Veterans.

The Internal Affairs Commission coordinates this program. The Internal Affairs Commission works closely with the Veterans Affairs and Rehabilitation Commission requesting and reviewing nominations.

Nominees will be accepted by any member of The American Legion in good standing filed with the Internal Affairs Commission under such procedures established by the commission as are necessary and consistent with the effective administration of such an award.

Those eligible for the award are: Any healthcare provider that is NOT a VA physician. Nominees must be a direct patient care provider.

NOMINATIONS MUST BE SUBMITTED IN NARRATIVE FORMAT WITH NAME OF THE POST AND DEPARTMENT IN THE UPPER LEFT-HAND CORNER.

Letters of recommendation must be submitted in narrative format not to exceed 500 words. Legion members making recommendations for this award must send the nomination through their Post Adjutant who will submit the nominations to their Department Adjutant. If a department receives more than one nomination, the Department must screen each nomination and select one nominee for submission to the National office.

Departments must submit their recommendation for the award to the Director, Veterans Affairs and Rehabilitation Division by **July 30th** of each year. Failure to submit in the proper format and/or by the cut-off date will invalidate the nomination.

Nominations will be submitted to the VA&R Commission for consideration during the National Convention Sunday Veterans Affairs & Rehabilitation Convention Committee Joint Meeting at which time the Commission will select one nominee for presentation. The nominee's name will be submitted to the National Adjutant for consideration and final approval at the Fall National Executive Committee meeting.

The award shall be awarded by the national commander annually at the Commander's Call during Washington Conference.

**DEPARTMENT OF VETERANS AFFAIRS
HEALTH CARE PROVIDER OF THE YEAR AWARD FORM**

Date: _____

Name: _____ Sex: ☐ Male ☐ Female

Home Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Age: _____

Marital Status: _____ Spouse's Name (if applicable): _____

Number of years working as a VA Physician: _____

*Justification: _____

(*Justification can be submitted on a separate page)

Agency Name: _____

Agency Director Title: _____

Nominee's Supervisor Title: _____

Agency Address: _____

City: _____ State: _____ Zip: _____

Department Submitting Nomination: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Department Commander Signature

Department Adjutant Signature

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. This information must be received by **JULY 30th**. Submit one copy of your application packet and it should conform to the instructions contained in this Veterans Affairs and Rehabilitation Memorandum.

**Mail to: Veterans Affairs and Rehabilitation Division
 1608 K Street, NW
 Washington, DC 20006**

**DEPARTMENT OF VETERANS AFFAIRS
PHYSICIAN OF THE YEAR AWARD
Information Sheet**

This Award Program permits The American Legion to honor a VA physician who has provided extraordinary service to our Nation's Veterans.

The Internal Affairs Commission coordinates this program. The Internal Affairs Commission works closely with the Veterans Affairs and Rehabilitation Commission requesting and reviewing nominations.

Nominees will be accepted by any member of The American Legion in good standing filed with the Internal Affairs Commission under such procedures established by the commission as are necessary and consistent with the effective administration of such an award.

Those eligible for the award are: Any VA physician. Nominees must be a direct patient care provider.

NOMINATIONS MUST BE SUBMITTED IN NARRATIVE FORMAT WITH NAME OF THE POST AND DEPARTMENT IN THE UPPER LEFT-HAND CORNER.

Letters of recommendation must be submitted in narrative format not to exceed 500 words. Legion members making recommendations for this award must send the nomination through their Post Adjutant who will submit the nominations to their Department Adjutant. If a department receives more than one nomination, the Department must screen each nomination and select one nominee for submission to the National office.

Departments must submit their recommendation for the award to the Director, Veterans Affairs and Rehabilitation Division by **July 30th** of each year. Failure to submit in the proper format and/or by the cut-off date will invalidate the nomination.

Nominations will be submitted to the VA&R Commission for consideration during the National Convention Sunday Veterans Affairs & Rehabilitation Convention Committee Joint Meeting at which time the Commission will select one nominee for presentation. The nominee's name will be submitted to the National Adjutant for consideration and final approval at the Fall National Executive Committee meeting.

The award shall be awarded by the national commander annually at the Commander's Call during Washington Conference.

**DEPARTMENT OF VETERANS AFFAIRS
PHYSICIAN OF THE YEAR AWARD FORM**

Date: _____

Name: _____ Sex: ☐ Male ☐ Female

Home Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Age: _____

Marital Status: _____ Spouse's Name (if applicable): _____

Number of years working as a VA Physician: _____

*Justification: _____

(*Justification can be submitted on a separate page)

Agency Name: _____

Agency Director Title: _____

Nominee's Supervisor Title: _____

Agency Address: _____

City: _____ State: _____ Zip: _____

Department Submitting Nomination: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Department Commander Signature

Department Adjutant Signature

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. This information must be received by **JULY 30th**. Submit one copy of your application packet and it should conform to the instructions contained in this Veterans Affairs and Rehabilitation Memorandum.

**Mail to: Veterans Affairs and Rehabilitation Division
 1608 K Street, NW
 Washington, DC 20006**



Rules Governing Award of the William F. Lenker National Service Trophy

(as revised by Res. 20, NEC, May 1-2, 1968)

AND

(Res. 4, NEC, October 17-18, 1990)

(Res. 2, NEC, October 18-19, 2006)

The William F. Lenker National Service Trophy is to be awarded annually to the department of The American Legion excelling in welfare and rehabilitation work for war veterans and their dependents; providing that the membership of that department shall be no less than 80 percent of the preceding year. For this purpose, membership of the department used in this calculation is to be based on the record as shown in the books of the National Treasurer on the last day of the preceding fiscal year.

Departments competing for this trophy shall present to the Veterans Affairs and Rehabilitation (VA&R) Division, the completed "Statement of Rehabilitation Activities" questionnaire which the National VA&R Commission shall furnish each department annually, no later than **July 15th**. The completed questionnaire must be duly certified by the department commander and adjutant and sent to:

The American Legion
Attn: VA&R Division
1608 K Street NW
Washington, DC 20006
Email: va&rdivision@legion.org

Each year, just before the National Convention, the National Commander shall appoint a committee of three to act as judges. The committee shall consist of the Chairman of the National VA&R Commission and any other two the National Commander shall see fit to designate.

Announcement of the award is to be made at each National Convention, and the winning department shall be formally advised by letter from the VA&R Director.

The title to this trophy is to remain with The American Legion. The original with engraved inscriptions of the winning departments is to remain at National Headquarters. A suitable laminated plaque containing a photograph of the trophy, with an attached engraved plate, will be awarded to and retained by the winning department. In addition to the laminated plaque, the winning department shall be presented with a gold plate suitable for attachment to the staff of the department banner and engraved as follows: "Winner William F. Lenker National Service Trophy, (year)."



Statement of Rehabilitation Activities for Consideration in Award of William F. Lenker National Service Trophy

Department

Date

Year covered by report _____
(Add additional sheets if necessary)

1. Number of posts in department: _____
2. Number of posts reporting rehabilitation activities to department Headquarters: _____
3. Number of posts having active Post Service Officers (PSOs): _____
4. Number of veterans assisted by PSOs: _____
5. Number of posts that have medical equipment to loan to: Veterans _____ Dependents _____
6. Number of posts that activities/programs help homeless veterans: _____
7. Number of veterans for whom you have found employment: _____
8. Number of veterans for whom you have found training opportunities: _____
9. How many posts provide military funeral honors: _____
10. To date, the number or regularly scheduled (RS) volunteers and RS hours contributed to VA Voluntary Service (VAVS) programs within your department: # RS Volunteers _____
RS Hours _____
11. To date, the number of occasional volunteers and occasional hours Contributed to VAVS programs within your department: # Occasional Vol _____
Occasional Hrs _____
12. Number of new VAVS volunteers and assignments within the past year: _____
13. Give a short report of the department and/or posts activities within the VAVS program at local VA health care facilities, or any similar projects at State Veterans Homes, or other facilities:

14. What does the department do to encourage and support youth volunteers:

15. Number of posts contributing to General Post Funds at local VA health care facilities:

of Posts _____ Contribution Amount _____

16. How many American Legion awards for voluntary service in the VAVS program were presented this year:

☐ 100 ☐ 300 ☐ 1,000 ☐ 2,000+

17. Do you have any special rehabilitation projects that regularly aid veterans and their dependents? Explain:

18. Number of Temporary Financial Assistance (TFA) applications received:

19. Number of Family Support Network referrals received:

20. List the department and/or post funds expended in rehabilitation-related activities:

21. Do you have a regular rehabilitation publicity program to acquaint veterans as to federal and state benefits:

Additional comments: _____

CERTIFICATION:

Department Commander Printed Name

Department Adjutant Printed Name

Department Commander Signature

Department Adjutant Signature

AUGUST

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39	Target Date Awards Points Program Information Sheet	Membership



**Frank N. Belgrano, Jr. Trophy
Transmittal of Narrative Statement
Information Sheet**

Awarded annually to the department which has rendered the most outstanding support during the period August 1 – July 31 to the program of the Boy Scouts of America. The award is based on the number of troops organized, strength of existing troops and general welfare of the Scout movement under Legion sponsorship within the department.

The following information is necessary to be considered for each year's competition.

Each department seeking consideration for the award must submit a written report to the Americanism Division at National Headquarters with a narrative description and substantiating evidence relating to the department's Scouting efforts and accomplishments for the reporting period. The design and length of the narrative is at the discretion of the department – the intention is to provide the selection committee information other than statistics to consider when determining the winning department.

This information must reach the Americanism Division at National Headquarters **no later than August 6th** (15 days prior to the National Convention).

Mail to: The American Legion
Attn: Americanism Division – Frank N. Belgrano, Jr. Trophy
P.O. Box 1055
Indianapolis, Indiana 46206-1055
Fax: 317-630-1369
Email: americanism@legion.org



TARGET DATE AWARDS POINTS PROGRAM

The department commander and department membership chairman may earn checks up to \$1,000 based on a points system for meeting national target dates and other target areas. Each department must accomplish its goal by the May target date, using traditional methods, to be eligible for awards.

An additional \$1,000 is awarded to the department for meeting all target dates.

The membership office will record traditional accomplishments on the transmittals received and processed at National Headquarters by the close of the target date business day.

POINTS KEY

TARGET I	(September)	(50%)	5,000 points
TARGET II	(October)	(55%)	5,500
TARGET III	(November)	(65%)	6,500
TARGET IV	(December)	(75%)	7,500
TARGET V	(January)	(80%)	8,000
TARGET VI	(February)	(85%)	8,500
TARGET VII	(March)	(90%)	9,000
TARGET VIII	(April)	(95%)	9,500
TARGET IX	(May)	(100%)	10,000

Post and district commanders should remember to place particular emphasis on renewing existing members (and reinstating expired members) as well as actively recruiting new members throughout the year.

For complete information on the National Awards Points Program, Target Dates, and information on other important membership goals and dates other than these target dates, see the National Awards Points Program Manual available from membership@legion.org.

SEPTEMBER

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2027 Membership Star Awards



2027 Membership Star Award orders must be placed by **September 11, 2026**. The orders will be delivered December 2026.

Membership Star Awards are not kept as a stock item. If your order is placed after **September 11, 2026**, a minimum order quantity and price increase may be applicable.

ORDER FORM

2027 Membership Star Awards

Plain Membership Stars 2027

Bronze	_____	qty.	x	\$4.20/ea.	=	Item Cost	<u>\$ 0.00</u>
Silver	_____	qty.	x	\$4.20/ea.	=	Item Cost	<u>\$ 0.00</u>
Gold	_____	qty.	x	\$4.20/ea.	=	Item Cost	<u>\$ 0.00</u>

Wreath Membership Stars 2027

Silver	_____	qty.	x	\$5.20/ea.	=	Item Cost	<u>\$ 0.00</u>
Gold	_____	qty.	x	\$5.20/ea.	=	Item Cost	<u>\$ 0.00</u>

TOTAL	<u>0</u>	qty.				TOTAL COST	<u>\$ 0.00</u>
-------	----------	------	--	--	--	------------	----------------

Department will be invoiced for actual shipping charges

Ship & Bill To:

The American Legion Department of Select Department

Street Address _____

City, State, Zip City Select ZIP

Attention _____

By entering your name here, you certify you are Department Adjutant

Authorized Signature _____

Send this completed form:

By Email:

SpecialOrders@legion.org

(Don't forget to attach this form)

By Mail:

American Legion Emblem Sales
Attn: Special Orders Representative
P.O. Box 36460
Indianapolis, IN 46236

OCTOBER

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43-44	Membership Challenge at Cmdr/Adj Conference Information Sheet & Sample Form	Membership



Membership Challenges at Commanders' and Adjutants' Conference

Information Sheet

Challenges between department commanders, department adjutants, or departments provide ammunition for the membership campaign ahead while adding a touch of humor and friendly rivalry during the fall meeting. It's "every commander for themselves" at challenge time.

All challenges must be turned in to the Internal Affairs & Membership Division by the conclusion of the fall meetings. This will permit the National Headquarters staff to review the challenges and to clarify any questions about them before the department officers leave Indianapolis. Acceptance of the challenges must be recorded on the challenge forms before they are turned in. Here are a few suggestions:

1. *Highest numerical total by a certain date.*
2. *Highest numerical gain over the prior year's official total by a certain date.*
3. *Highest percentage of this year's goal by a certain date.*
4. *Highest percentage gain over the prior year's official total by a certain date.*
5. *Most new posts chartered.*
6. *Greatest number **or** percentage of new members.*
7. *Highest number of posts exceeding 150% of Goal.*

A sample challenge form is available for use.



DEPARTMENT MEMBERSHIP CHALLENGE

(Must be turned in to staff liaison)

Date: _____

Department making challenge: _____

Challenge directed to Department of: _____

Official wording as to term and prizes (if not picked from list below):

Challenge based on the following membership performance as tabulated at National Headquarters:

(*Sample* challenges – if desired, check appropriate item)

- | | |
|--|--|
| ☐ Highest numerical total Membership | ☐ Lowest Percent of HQ Post Members |
| ☐ Highest percent of current year's goal | ☐ Highest percent increase over previous year |
| ☐ Department to hit all targets (Aug-May) | ☐ Department to hit most targets (Aug-May) |
| ☐ First to hit 100 percent of current year goal | ☐ Most New Post Charters |

Challenge is based on appropriate information from:

Target Date: _____ Membership Report Dated week of: _____

CHALLENGED BY:

ACCEPTED BY:

Printed Name: _____

Printed Name: _____

Signature: _____

Signature: _____

Title: _____

Title: _____

Department: _____

Department: _____

**CHALLENGES MUST CONTAIN THE SIGNATURES OF BOTH THE CHALLENGER AND THE
ACCEPTING DEPARTMENT OFFICIAL**

NOVEMBER

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49-50	Department Oratorical Contest Report of Site & Date Instructions & Form	Americanism



Report of Site and Date of Current American Legion Boys State Program

Information/Instructions

Purpose: Inform the Americanism Division at National Headquarters of the site and date for your department's Boys State program.

Deadline: **November 30th** each year.

Email: Americanism@legion.org

Fax: 317-630-1369

Mail: The American Legion National Headquarters
Attn: Americanism Division - Boys State
P.O. Box 1055, Indianapolis, Indiana 46206

A copy of the report form follows. Remember to retain a copy for your files.



REPORT OF SITE AND DATE FOR AMERICAN LEGION BOYS STATE PROGRAM

Department: _____

Date Submitted: _____

Submitted by: _____

Name of Boys State program: _____

Name of facility: _____

City of facility: _____

Program will be conducted the dates of _____ to _____

Boys State program website address: _____

Name of Boys State director: _____

Director's email address: _____

Director's contact phone number: _____

Name of Boys State Chairman: _____

Chairman's email address: _____

Chairman's contact phone number: _____

Send completed form NO LATER THAN NOVEMBER 30TH.

Email: Americanism@legion.org

Fax: 317-630-1369

Mail: The American Legion National Headquarters
Attn: Americanism Division - Boys State
P.O. Box 1055, Indianapolis, Indiana 46206



Department Distribution of Bulk Shipment Notification

National Headquarters move to a more digital access of bulk shipment items will save printing and postage costs. A request order form will be emailed to the department for completion when the forms are due for that particular year.

Hard copies of the Post Adjutant's Guide and SAL Handbook will be sent every **THREE** years, unless there is a major change.

Hard copies of the Why You Should Belong Brochure, TAL/SAL Membership Applications, and Post Officer's Guide will be sent every **OTHER** year, unless there is a major change.

Post Officer's Guide, Post Adjutant's Guide, and the SAL Squadron Handbook will still be sent according to how many post/squadrons your department has at the time bulk shipment is sent out.

The supplies received should be distributed to all your respective posts and squadrons upon request. National Headquarters keeps a minimal supply in inventory.

All publications, brochures, and forms can be downloaded from the national website at [Publications | The American Legion](#) for the Legion and [Publications and Forms | The American Legion](#) for the Sons.

If you have any questions or concerns, please call Internal Affairs & Membership at 317-630-1327 or email at ia@legion.org.

Report of Site and Date American Legion Department Oratorical Contest

Information/Instructions

Purpose of
Report: To inform National Headquarters of the site and date of the department's Oratorical Contest.

Deadline: Annually on November 30th

Mail: The American Legion
Attn: Americanism Division – Oratorical
The American Legion
P.O. Box 1055
Indianapolis, Indiana 46206

Fax: 317-630-1369

Email: Americanism@legion.org

A copy of the report form follows. Mail, fax, or email the original report form and retain one for your files.

NOTE: Certification of department Oratorical champions MUST be submitted to the Americanism Division in compliance with the deadline and guidelines published each year in the Official Oratorical Rules. Failure to meet the established deadline for the certification of a department winner could result in the contestant's disqualification from the national contest. Departments are encouraged to schedule department Oratorical contests accordingly.

**Report of Site and Date
American Legion Oratorical Contest Information**

Department of: _____
Date submitted: _____
Submitted by: _____

Name of facility: _____

City of
facility: _____

Program will be conducted the date of: _____

Department Oratorical website: _____

Department Adjutant: _____

Email address: _____

Oratorical
Chairman: _____

Email address: _____

Contact phone number: _____

Send completed form NO LATER THAN November 30th to either:

MAIL: The American Legion
 Attn: Americanism Division – Oratorical
 P.O. Box 1055
 Indianapolis, Indiana 46206

FAX: 317-630-1369

EMAIL: Americanism@legion.org

NOTE: Certification of department Oratorical champions MUST be submitted to the Americanism Division in compliance with the deadline and guidelines published each year in the Official Oratorical Rules. Failure to meet the established deadline for certification of a department winner could result in the contestant's disqualification from the national contest. Departments are encouraged to schedule department Oratorical contests accordingly.

DECEMBER

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52-53	Report of Date & Site of Next Department Convention Information Sheet & Form	Executive Office



Report of Date and Site of Next Department Convention Information Sheet

Purpose: To inform National Headquarters of time and place of next Department Convention.

Deadline: Mail by December 20 (or as soon thereafter as determination is made).

Mail to: National Adjutant
The American Legion
P.O. Box 1055
Indianapolis, IN 46206-1055

Fax: 317-630-1223

Email: talforms@legion.org

Note: While it is customary, in many departments, for newly elected National Executive Committeeman and Alternate National Executive Committeeman to wear the red cap for photos taken at the Department Convention. The newly elected officers should be reminded that they can't officially wear the cap until immediately upon the adjournment of the National Convention when their term of office officially starts (Article VII, Section 2 of the National Constitution).



Report of Date and Site of Next Department Convention

TO: National Adjutant
The American Legion
P.O. Box 1055
Indianapolis, Indiana 46206-1055
Fax: 317-630-1223
E-mail: talforms@legion.org

The next annual convention of the Department of _____,
The American Legion, will be held at:

City:	
Hotel:	
Hotel Address:	
Hotel Telephone No:	
Name of Convention Center:	
Convention Center Address:	
Convention Center Telephone No:	
Inclusive Convention Dates:	On: _____ to: _____

Signature of Department Adjutant

Department

Date

SEND TO NATIONAL ADJUTANT'S OFFICE BY DECEMBER 20
(Or as soon thereafter as possible)

JANUARY

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81-82	Printing/Shipping Membership Cards Instruction Sheet & Form	Internal Affairs
83-84	Printing/Shipping SAL Membership Cards Instruction Sheet & Form	Internal Affairs
85-87	Veterans Employment & Education Commission Awards Information Sheets	VE&E

Requisitions For American Legion Baseball Materials

Listed below are baseball materials available for departments and teams to download from The American Legion website and print as desired for the coming season. Materials are available for download from:

www.Legion.org/Publications

<u>PUBLICATION NO.</u>	<u>DESCRIPTION</u>
21-000	American Legion Baseball Brochure
21-001	American Legion Baseball Senior Rule Book
21-001	American Legion Baseball Junior Rule Book
21-005	American Legion Baseball Promotional Booklet

(Information only) - Certificates of Participation; Official American Legion Baseballs; Official American Legion T-shirts, Baseball Booster Decals; Official Baseball Hats and Uniforms are available from National Emblem Sales. Please order directly from National Emblem Sales at (888) 453-4466 or emblem@legion.org or visit www.Emblem.Legion.org.

FROM: Program Manager for Baseball
Americanism Division
The American Legion
PO Box 1055
Indianapolis, IN 46206
baseball@legion.org



AWARD TO ENHANCE THE LIVES OF DISABLED PERSONS

Information Sheet

Purpose: The purpose of the National Organization on Disability (NOD) Awards competition is to confer national recognition on organizations, such as The American Legion, for their involvement in enhancing the lives of disabled persons by providing opportunities for their participation in community activities. Any Legion project or program that improves the quality of life for disabled persons will be considered.

History: Since 1987, American Legion posts have competed for prizes through the Awards Program. NOD will continue to award certificates to the winners, and all nominees and their departments will receive American Legion citations of appreciation.

Criteria: All entries must be accompanied by an official nomination form (see the following page) and must not be longer than two pages of narrative. Supporting documents, which may also be submitted with the nomination, must not exceed ten pages.

Deadline: The deadline for submission of nominations of the Award to Enhance the Lives of Disabled Persons is no later than **January 15th**. Nominations received after that date will not be eligible for consideration for the national award.

Procedure: Nominations from posts, or other sources must be sent to department headquarters. The department then selects **one** nominee and sends the winning nominations with their supporting information to the National Veterans Employment & Education Commission. Either the department adjutant or department employment chairman must sign the nomination. Nominations that arrive without supporting information **will not** be eligible for the national awards.

Nomination Form: A copy of the official nomination form will follow. Additional copies may also be obtained by writing or calling the National Veterans Employment & Education Commission, The American Legion, 1608 K Street NW, Washington, DC 20006; phone 202-861-2700

Award: The commission provides free plaques to each department that submits nominations. It is recommended, however, that posts and departments recognize their other nominees with plaques or awards that can be purchased for a nominal cost through Emblem Sales. The national winner will receive a large plaque to be presented by the National Commander at the annual National Convention and will receive a stipend to help defray the cost of their representative's travel to the convention city to accept the award.

Submit to: **The American Legion**
Attn: National Veterans Employment & Education Commission
1608 K Street NW
Washington, DC 20006
Email: VeteransEmploymentandEducation@legion.org



AWARD TO ENHANCE THE LIVES OF DISABLED PERSONS Nomination Form

The National Organization on disability awards certificates to organizations that significantly improve the ability of persons with disabilities to participate in the public life of the community. The purpose of that program is to confer national recognition on private sector organizations, like The American Legion, for their efforts to enhance the lives of disabled persons.

The American Legion Department of: _____ Date: _____

The American Legion Post's name and number:	
Post's street address:	
Post's city, state, zip:	
Post's telephone number:	
Post's membership:	
How many members worked on this project?	
Name of Post's Commander:	
Post Commander's telephone number:	
Name & title of person making nomination:	
Daytime telephone number of nominator:	

Describe what your nominee has done that makes that American Legion post or employer worthy of one of this award. What special accommodations have you included for your workforce? What specific project has that post or employer instituted that enhances the lives of disabled persons by helping them to participate in community activities? Was this solely a post project or were other community organizations involved? What tangible assets were involved in your nominee's project (e.g., volunteer hours, funds, etc.)? What measurable impact, if any, has your nominee's project had on the community as a whole? What measurable impact on disabled veterans, if any? Please limit your written narrative to two pages.

Only those nominations that include adequate documentation on the nominee's employment practices concerning veterans will be considered for the National Award to Enhance the Lives of Disabled Persons. The nominator should provide a copy of the company's written policy on employment of veterans if available, a description of how the employer supports veterans' activities in the community, and any other reasons why the nominee should be selected to be the National Award to Enhance the Lives of Disabled Persons winner.

Nominations by posts and individuals must be sent to department headquarters as soon as possible so that the department will have time to review all nominations received and make the selection of its winners.

All nominations from departments must arrive at National Headquarters on or before January 15th. Either the department adjutant or department employment chairman must approve this nomination.

Approved Signature: _____ Date: _____

Check One: ☐ Department Adjutant ☐ Department Employment Chairman

Desired presentation date at Department Convention: _____

SUPPORTING DOCUMENTATION – Award to Enhance the Lives of Disabled Persons

[illegible]



AWARD TO ENHANCE THE LIVES OF DISABLED PERSONS

Nomination Form - continued

Legion Post's name and number: _____

PLEASE PRINT OR TYPE INFORMATION

1. Exact name of company or firm: _____
2. Business address: _____

3. Name and title of company's contact person: _____
4. Telephone number: _____
5. Type of business: _____
6. Total employees: _____ Disabled employees _____ **THE**
NOMINEE SHOULD BE A COMPANY OR FIRM, NOT AN INDIVIDUAL

7. Give reasons why you feel this nominee should receive this year's award to enhance the lives of the Disabled. Include a brief summary of the company's policies and records, which qualify it, such as hiring, promotion, retention, and affirmative employment policies. Attach additional pages if necessary.

Please print clearly the exact name and address of nominated firm

FIRM NAME: _____

CITY & STATE: _____

Nomination submitted by: _____ Date: _____

Title: _____ Telephone No.: _____

NATIONAL VETERANS EMPLOYMENT & EDUCATION COMMISSION
1608 K STREET NW WASHINGTON, DC 20006

OR E-MAIL A SCANNED COPY
VE&E@LEGION.ORG

DEPARTMENTS MAY REPRODUCE ALL FORMS FOR WIDER DISTRIBUTION



50-60-70-75-80-85-90 Continuous Years Membership Certificates

The National Executive Committee has directed the issuance of certificates to members of The American Legion credited with 50 years of continuous membership. This has been further expanded to include members with 60, 70, 75, 80, 85 or 90 years of continuous membership. An eligible member receives only one of each of these special awards.

January 15 has been determined to be the cutoff for getting memberships transmitted, or submitting continuous years changes to National to ensure a certificate will be printed for members who have not previously received one of these awards.

The certificates are sent directly to the posts (instead of the department) for presentation to the members to be honored. It is suggested that a special ceremony be held on or near the founding birth date of The American Legion (March 15).

A Word document certificate template will be sent electronically to the departments to be used for members who may have been omitted by National...a limited supply of blank certificates will be mailed to the departments for this purpose.

National prints these certificates only once a year. Should a post ask, unless they need them for a special presentation, they should be encouraged to wait until the next scheduled printing, subject to the member's record being properly recorded. If inquiries are received, make sure National receives a notification to update the record of the member, otherwise a certificate won't be printed, even though the Legionnaire may be entitled to one.

Remember, **January 15** is the cutoff for getting changes/memberships to National so qualified members are not left out of the annual run.



THE AMERICAN LEGION

DEPARTMENT HEADQUARTERS POST MEMBERSHIP CARD INFORMATION SHEET

- Designate a signature to be printed on the Department Headquarters Post membership cards. This is usually the Department Adjutant, however, occasionally a department will opt to have another officer sign. (i.e. Department Commander or Membership Chairman)
- Provide **two** (2) samples of the designated department official's signature to appear on the departments HQ post membership cards. The designated department official should use a black fine or medium point pen or marker and sign below to provide two original sample signatures; National will select one to use.
- Choose the preferred address format on the following page by selecting the applicable check box above **Option 1** or **Option 2**.

IMPORTANT: Sign in the center of each text box on the following page and/or upload the signing department official's electronic signature

Option Definitions:

OPTION 1: Have the full address of the member printed on the membership card. This is ideal if you use window envelopes to mail the member's cards, avoiding the need to type labels or envelopes.

OPTION 2: Have only the post's city (*location*) printed on the card, the same format as those printed for the local posts.

The American Legion

Attn: Internal Affairs & Membership

PO Box 1055

Indianapolis, IN 46206-1055

Phone: 317-630-1327

Fax: 317-630-1413

Email: IA@legion.org

Deadline: January 15

REVISED: MAR / 2025



THE AMERICAN LEGION

DEPARTMENT HEADQUARTERS POST

MEMBERSHIP CARD FORM

1. SIGN TWICE BELOW

When the Department Headquarters Post membership cards are printed, we will pre-print the signature of the designated department official on the right-hand portion of the 3-part card (the member's portion).

The designated department official should use a **black fine or medium point pen or marker** and sign below to provide two original sample signatures; National will select one to use.

IMPORTANT: SIGN IN THE CENTER OF EACH TEXT BOX BELOW OR UPLOAD AN ELECTRONIC SIGNATURE. AVOID SIGNING ON OR CLOSE TO ANY LINES WITHIN THE TEXT BOXES.

**Print the name that matches both signatures above: _____

2. CHECK THE APPLICABLE BOX BELOW FOR OPTION 1 OR OPTION 2

Option Definitions:

Option 1: The Department Headquarters Post membership card can be pre-printed with each member's complete address on the card, allowing the cards to be inserted in a window envelope and avoiding the need to type an address label or envelope.

Option 2: The cards can be printed with only the city location of the post. (*Note:* Cards printed for all other posts will be done using Option 2).

OPTION 1: _____

Membership Card	
JOHN Q LEGIONNAIRE	★
1234 E MAIN ST BIRMINGHAM AL 35204	

OPTION 2: _____

Membership Card	
JOHN Q LEGIONNAIRE	★
BIRMINGHAM	

Department Adjutant – Signature

Date

Department

The American Legion
Attn: Internal Affairs & Membership
P.O. Box 1055
Indianapolis, IN 46206-1055
Phone: 317-630-1327
Fax: 317-630-1413
Email: IA@legion.org
Deadline: January 15

REVISED: MAR / 2025



EMPLOYER OF OLDER WORKERS AWARD

Information Sheet

History: In 1958, the National Veterans Employment & Education Commission expanded its Employer Awards Program by creating an award for employers of older workers. Because the commission saw older workers as a valuable economic resource of proven skills, stability and experience, it wanted to encourage employers to hire and retain older workers in the work force. National “Employ the Older Worker Week” was established by The American Legion and is observed during the last full week of each September.

The National Veterans Employment & Education Commission believes that this particular award category will become increasingly important over the next few years. As the American workforce ages, it is important to honor employers who have demonstrated their commitment to employing older workers.

Purpose of Award: To confer recognition on one employer in each state for an outstanding record in the hiring and retention of older workers.

Deadline: The deadline for submission of nominations of Employer of Older Workers is no later than **January 15th**. Nominations received after that date will not be eligible for consideration for the national award.

Procedure: Nominations from posts, or other sources must be sent to department headquarters. The department then selects **one** nominee and sends the winning nominations with their supporting information to the National Veterans Employment & Education Commission. Either the department adjutant or department employment chairman must sign the nomination. Nominations that arrive without supporting information **will not** be eligible for the national awards.

Nomination Form: A copy of the official nomination form will follow. Additional copies may also be obtained by writing or calling the National Veterans Employment & Education Commission, The American Legion, 1608 K Street NW, Washington, DC 20006; phone 202-861-2700

Award: The commission provides free plaques to each department that submits nominations. It is recommended, however, that posts and departments recognize their other nominees with plaques or awards that can be purchased for a nominal cost through Emblem Sales. The national winner will receive a large plaque to be presented by the National Commander at the annual National Convention and will receive a stipend to help defray the cost of their representative’s travel to the convention city to accept the award.

Submit to: **The American Legion**
Attn: National Veterans Employment & Education Commission
1608 K Street NW
Washington, DC 20006
Email: VeteransEmploymentandEducation@legion.org



THE EMPLOYER OF OLDER WORKERS AWARD

Nomination Form

The American Legion Department of: _____ Date: _____

The American Legion Post's name and number: _____

Please print or type information:

Exact Name of Company:		
Business Street Address:		
City, State, Zip		
Name & title of company contact:		
Contact's telephone number:		
Type of business:		
Total number employees:	Number employees over 55:	
Employees 55 yrs. old with 5 yrs. or more service:	Number of employees 55 or over who are veterans:	
Number of hires last yr. over 55:		
Name & title of person making this nomination:		
Telephone Number of person making nomination:		

Attach additional pages of reasons why you feel this nominee should receive this year's Employer of Older Workers Award. Include a brief summary of the company's policies and records that qualify it, such as hiring, promotion, retention, and affirmative employment policies.

Only those nominations that include adequate documentation on the nominee's employment practices concerning veterans will be considered for the National Employer of Older Workers Awards. The nominator should provide a copy of the company's written policy on employment of veterans if available, a description of how the employer supports veterans' activities in the community, and any other reasons why the nominee should be selected to be the Employer of Older Workers Award winner.

Nominations by posts and individuals must be sent to department headquarters as soon as possible so that the department will have time to review all nominations received and make the selection of its winners.

**All nominations from departments must arrive at National Headquarters on or before January 15th.
Either the department adjutant or department employment chairman must approve this nomination.**

Approved Signature: _____ Date: _____

Check One: ☐ Department Adjutant ☐ Department Employment Chairman

Desired presentation date at Department Convention: _____

Submit to:

The American Legion, Attn: National Veterans Employment & Education Commission
1608 K Street NW, Washington, DC 20006 or Email: VeteransEmploymentandEducation@legion.org



THE EMPLOYER OF VETERANS AWARD

Information Sheet

History: The Veterans Employment and Education Commission expanded its Employer Awards Program in 1969 when it created an award category for employers of veterans. Originally, departments were permitted to submit one nomination each for a large and a small employer of veterans. In 1992, the number of awards for employers of veterans was increased. Today, departments may submit a total of 3 nominations for this category for national consideration.

- **One** nomination for a small company with 50 or fewer employees
- **One** nomination for a medium sized company with workforces of 51 to 200
- **One** nomination for a large company with 201 or more employees

National Awards: These awards, one in each of the three employers of veterans size categories, are presented at the National Convention. In order to be eligible for the Employer of Veterans Awards, nominees must meet the following criteria:

- 1) At least 10 percent of the nominee's workforce must be veterans.
- 2) The nominee must have been in business for at least five years.
- 3) The nominee cannot restrict employment to veterans only.
- 4) The nominee must be a private sector employer. In other words, the nominee cannot be a city, state, or federal employer.

A department that submits a nomination for an employer of veterans that does not meet the above criteria will receive a plaque for presentation. However, that nominee **will not** be eligible for a national award.

Selections of the Employer of Veterans Awards are made by the Veterans Employment & Education Commission Award Subcommittee, which meets during the annual Washington Conference.

The purpose of Award: To confer recognition on one small, one medium and one large employer in each state for outstanding records in the hiring and retention of veterans.

Deadline: The deadline for submission of nominations of employers of veterans is no later than January 15th. Nominations received after that date will not be eligible for consideration for the national award.

Procedure: Nominations from posts, or sources outside the Legion, must be sent to department headquarters. The department then selects **one** nominee each in the small, medium and large employer categories and sends the nomination forms and supporting information for the winning employers to the National Employment and Education Commission. Those nomination forms must be signed by either the department adjutant or department employment chairman. Nominations that arrive without supporting information **will not** be eligible for the national awards.

Nomination Form: A copy of the official nomination form, which is the same for all three employer size categories, follows. Additional copies may also be obtained by writing or calling the Veterans Employment and Education Commission, The American Legion, 1608 K Street NW, Washington, DC 20006; phone 202-861-2700; email VeteransEmploymentandEducation@legion.org.

Award: The commission provides free plaques to each department that submits nominations. It is recommended, however, that posts and departments recognize their other nominees with plaques or awards that can be purchased for a nominal cost through Emblem Sales. The national winner will receive a large plaque to be presented by the National Commander at the Annual National convention and will receive a stipend to help defray the cost of their representative's travel to the convention city to accept the award.

Submit to: **The American Legion**
 Attn: National Veterans Employment & Education Commission
 1608 K Street NW
 Washington, DC 20006
 Email: VeteransEmploymentandEducation@legion.org

DEPARTMENTS MAY REPRODUCE ALL FORMS FOR WIDER DISTRIBUTION



THE EMPLOYER OF VETERANS AWARD

Nomination Form

The American Legion Department of: _____ Date: _____

The American Legion Post's name and number: _____

Employer's Size: (check one)

_____ **Small (50 or fewer employees)**

_____ **Medium (51-200 employees)**

_____ **Large (201 or more employees)**

Posts submit nominations to their Departments for consideration. Departments select one nomination per employer size category and submit those nominations to National Headquarters. The Veterans Employment and Education Commission will provide a plaque for each nominee. During the Washington Conference, the Employment and Education Award Subcommittee reviews all eligible nominations in the three size categories and selects a winner in each category. The three winners are then invited to send their representatives to the National Convention to receive the Employer of Veterans Awards. In order to be eligible for the national awards, the nominee must meet the following criteria:

- 1) At least 10 percent of the employer's workforce must be veterans.
- 2) The employer must have been in business for at least five years.
- 3) The employer cannot restrict employment to veterans only.
- 4) The nominee must be a private sector employer. In other words, the nominee cannot be a city, state or federal employer.

PLEASE PRINT OR TYPE INFORMATION

1. Exact name of company: _____
2. Business address: _____
3. Name and title of the company's contact person: _____
4. Contact person's telephone number: _____
5. Is the employer a branch or subsidiary? _____ If yes, what is the name and address of the parent company? _____
6. Date the company, or branch, was established: _____
7. Average number of employees over the past five years: _____

8. Is the company's business seasonal? _____ If yes, how many employees are fulltime? _____
How many are part-time? _____

9. Total number of employees: _____ Number of veterans: _____ Percentage of veterans: _____

10. Total hires last year: _____ Number of veterans: _____ Percentage of veterans: _____

Only those nominations that include adequate documentation on the nominee's employment practices concerning veterans will be considered for the National Employer of Veterans Awards. The nominator should provide a copy of the company's written policy on employment of veterans if available, a description of how the employer supports veterans' activities in the community, and any other reasons why the nominee should be selected to be the Employer of Veterans Award winner.

Nominations by Posts and individuals must be sent to department headquarters as soon as possible so that the department will have time to review all nominations received and make the selection of its winners.

Name, title, address, and daytime telephone number of the person making the nomination:

All nominations from departments must arrive at National Headquarters on or before January 15th. Either the department adjutant or department employment chairman must approve this nomination.

Approved Signature: _____ Date: _____

Check One: ☐ Department Adjutant ☐ Department Employment Chairman

Desired presentation date at Department Convention: _____

Mail to: The American Legion
Attn: National Veterans Employment & Education Commission
1608 K Street NW
Washington, DC 20006
E-mail: VeteransEmploymentandEducation@legion.org

DEPARTMENTS MAY REPRODUCE ALL FORMS FOR WIDER DISTRIBUTION



EMPLOYMENT SERVICE AWARDS

Information Sheet

History: In 1990, a resolution established a national awards program to recognize outstanding Employment Service (ES) offices and employees.

Both the National Veterans Employment & Education Commission and the Internal Affairs Commission's Trophies and Awards Subcommittee conducted extensive studies and both recommended approval and referred the resolution to the National Executive Committee for final approval. The NEC unanimously approved the resolution at its spring 1992 meeting.

Purpose: The purpose of the ES awards program is to confer national recognition annually on one outstanding Local Veterans Employment Representative (LVER) and one Disabled Veterans Outreach Program specialist (DVOP). LVERs, DVOPs, and the ES office provide job counseling, testing and placement assistance to unemployed and underemployed veterans.

Deadline: The deadline for submission of nominations of the ES office is no later than **January 15th**. Nominations received after that date **will not** be eligible for consideration for the national award.

Procedure: Nominations from posts, ES employees or other sources must be sent to department headquarters. The department then selects **one** nominee each in the LVER, DVOP, and ES Office categories, and sends the winning nominations with their supporting information to the National Veterans Employment & Education Commission. Either the department adjutant or department employment chairman must sign those nominations. Nominations that arrive without supporting information **will not** be eligible for the national awards.

Nomination Form: A copy of the official nomination form, which is the same for all the ES office categories, follows. Additional copies may also be obtained by writing or calling the National Veterans Employment & Education Commission, The American Legion, 1608 K Street NW, Washington, DC 20006; phone 202-8612700

Award: The commission provides free plaques to each department that submits nominations. It is recommended, however, that posts and departments recognize their other nominees with plaques or awards that can be purchased for a nominal cost through Emblem Sales. The national winner will receive a large plaque to be presented by the National Commander at the annual National Convention and will receive a stipend to help defray the cost of their representative's travel to the convention city to accept the award.

Submit to: The American Legion
Attn: National Veterans Employment & Education Commission
1608 K Street NW
Washington, DC 20006
Email: VeteransEmploymentandEducation@legion.org

DEPARTMENTS MAY REPRODUCE ALL FORMS FOR WIDER DISTRIBUTION



**THE NATIONAL VETERANS EDUCATION &
ECONOMIC COMMISSION
EMPLOYMENT SERVICE AWARD**

Nomination Form

The American Legion Department of: _____ Date: _____

The American Legion Post's name and number: _____

Award Category: Employment Service Local Office Award

Name and title of nominee:		
Street Address:		
City, State, Zip:		
Daytime telephone number:		
Office manager's name:		
Name and title of nominator:		
Street Address:		
City, State, Zip:		
Daytime telephone number:		
Nominator's signature:		
1. Total applicants available:		
2. Applicants entered employment:		
3. Percent of total applicants entered employment:		
4. Total veteran applicants available:		
5. Total veterans entered employment;		
6. Percent of total veterans entered employment:		
7. Total disabled veterans applicants available:		
8. Disabled veterans entered employment:		
9. Percent of disabled veterans entered employment:		

Please also document the following on a separate page: Management support; community relations; involvement with American Legion programs, including Employer Awards Program. You are encouraged to provide your annual office performance measures. You may add up to one page of supporting data on any of these subjects.

Only those nominations that include adequate documentation on the nominee's employment practices concerning veterans will be considered for the National Employment Service Awards. The nominator should provide a copy of the company's written policy on employment of veterans if available, a description of how the employer supports veterans' activities in the community, and any other reasons why the nominee should be selected to be the Employer Service Award winner.

Nominations by Posts and individuals must be sent to department headquarters as soon as possible so that the department will have time to review all nominations received and make the selection of its winners.

**All nominations from departments must arrive at National Headquarters on or before January 15th.
Either the department adjutant or department employment chairman must approve this nomination.**

Approved Signature

Date

Check One:

☐

Department Adjutant

☐

Department Employment Chairman

Desired presentation date at Department Convention: _____

Submit to: **The American Legion**
Attn: National Veterans Employment & Education Commission
1608 K Street NW
Washington, DC 20006
Email: VeteransEmploymentandEducation@legion.org



THE NATIONAL VETERANS EDUCATION & ECONOMIC COMMISSION EMPLOYMENT SERVICE AWARD

Nomination Form

The American Legion Department of: _____ Date: _____

The American Legion Post's name and number: _____

Award Category (check one):

☐ LVER

☐ DVOP

Name and title of nominee:	
Street Address:	
City, State, Zip:	
Daytime telephone number:	
Office manager's name:	
Name and title of nominator:	
Street Address:	
City, State, Zip:	
Daytime telephone number:	
Nominator's signature:	
Veteran Placement Activity (Annual Figures):	
1. Veterans placed in full-time employment:	
2. Veterans Placed as a result of job development:	
3. Disabled veterans entered employment:	

Please document the following: Support of American Legion programs, including Employer Awards; leadership activities; community service; special achievements; use of technological innovations (E-mail, Internet, etc.). You may add up to two pages of supporting data on any subject listed.

Only those nominations that include adequate documentation on the nominee's employment practices concerning veterans will be considered for the National Employment Service Awards. The nominator should provide a copy of the company's written policy on employment of veterans if available, a description of how the employer supports veterans' activities in the community, and any other reasons why the nominee should be selected to be the Employer Service Award winner.

Nominations by posts and individuals must be sent to department headquarters as soon as possible so that the department will have time to review all nominations received and make the selection of its winners.

**All nominations from departments must arrive at National Headquarters on or before January 15th.
Either the department adjutant or department employment chairman must approve this nomination.**

Approved Signature

Date

Check One: ☐ Department Adjutant ☐ Department Employment Chairman

Desired presentation date at Department Convention: _____

Submit to: **The American Legion**
 Attn: National Veterans Employment & Education Commission
 1608 K Street NW
 Washington, DC 20006
 Email: VeteransEmploymentandEducation@legion.org

[illegible]

CERTIFICATION OF POSTS EARNING
**FIVE CONSECUTIVE YEARS ALL-TIME HIGH
AWARD**

This award is for a citation for a post that has five or more consecutive years all-time high. A minimum of five consecutive years is necessary to qualify, but a citation can be earned each year the post continues its all-time high performance after the fifth year.

Date _____

The Department of _____ requests citations for the following posts:

List posts in ascending numerical order.

<i>Post #</i>	<i>Name of Post</i>	Number of consecutive years of all-time high membership		
		<i>Number of years</i>	<i>From</i>	<i>To</i>

Department Adjutant

Department

TO: The American Legion
Attn: Internal Affairs & Membership Division
PO Box 1055
Indianapolis, IN 46206-1055
Fax: 317-630-1413
E-mail: membership@legion.org

DUPLICATE FORM AS NECESSARY



THE AMERICAN LEGION INFORMATION SHEET FOR MEMBERSHIP CARD REPLACEMENTS AND DUPLICATES

MEMBERSHIP CARDS

Information on handling the three-part membership cards by posts can be found in the **Post Adjutant's Guide** (Item No. 30-118). It is recommended that each Post Adjutant have a copy of this publication.

Note: National headquarters provides all departments a specific quantity of Post Adjutant's Guides for all active posts plus an overage during the annual distribution of bulk shipment supplies.

REPLACEMENT CARDS & DUPLICATE DEPARTMENT RECORD CARDS

If a member loses their *official* membership card (the right section of the three-part form), the post should provide a replacement card from their EXTRA supply of blank cards.

If any portion of the three-part card is lost or destroyed, and needs to be duplicated, the post should provide these from their EXTRA supply of blank cards.

Important: Any preprinted information on the blank cards should NOT be altered.

Duplicate Department Record cards are noted and transmitted along with regular cards to the Department.



MICHAEL GUTY HOMELESS VETERANS OUTREACH AWARD

Information Sheet

In January of 2003, the Veterans Employment & Education Commission requested that each department appoint a Homeless Veterans Task Force chairman, who should coordinate the department's activities and report on them to the department adjutant and to the Veterans Employment & Education Division at least once a year.

The Homeless Veterans Outreach Award, instituted in 2005, recognizes departments for their activities toward eliminating homelessness among veterans and prevention of future homeless veterans.

Deadline: The deadline for submission of nominations for this outreach award is no later than **January 15th**. Nominations received after that date will not be eligible for consideration for the national award.

Criteria: This award will be given to The American Legion department that demonstrates American Legion family involvement in homeless veteran initiatives that show outstanding support for activity in any or all of these areas: **volunteerism, prevention, supportive housing, advocacy and fundraising**.

Have you appointed a Homeless Veterans Task Force chairman? Does he/she have a committee? How often do they meet? Are your members working with the Sons of The American Legion? The American Legion Auxiliary? Are they working with agencies within the Departments of Defense, Labor, and Veterans Affairs? Are they working with local and county agencies, shelters, and faith-based and community-based organizations?

Tell us how many of your members are involved in your programs. Do programs operate year-round or once a year? How are your activities organized?

Please tell us in narrative form what you are doing toward the goal of ending homelessness among veterans.

The Homeless Veterans Task Force executive committee will review the reports during the Washington Conference, and the winner chosen by the National Veterans Employment & Education Commission Awards Subcommittee.

Procedure: Nominations that arrive without supporting information **will not** be eligible for the national awards.

Nomination Form: A copy of the official nomination form will follow. Additional copies may also be obtained by writing or calling the National Veterans Employment & Education Commission, The American Legion, 1608 K Street NW, Washington, DC 20006; phone 202-861-2700

Award: The commission provides free plaques to each department that submits nominations. It is recommended, however, that posts and departments recognize their other nominees with plaques or awards that can be purchased for a nominal cost through Emblem Sales. The national winner will receive a large plaque to be presented by the National Commander at the annual National Convention and will receive a stipend to help defray the cost of their representative's travel to the convention city to accept the award.

Submit to: **The American Legion**
Attn: National Veterans Employment & Education Commission
1608 K Street NW
Washington, DC 20006
Email: VeteransEmploymentandEducation@legion.org

DEPARTMENTS MAY REPRODUCE ALL FORMS FOR WIDER DISTRIBUTION

MICHAEL GUTY HOMELESS VETERANS OUTREACH AWARD

Nomination Form

The American Legion Department of: _____ Date: _____

Entry Check List:

1,500 words, typed and available in MS Word format

Provide general program information: Program title, contact name and information, short program description, list of other organizations involved in this program, annual budget.

Define program objectives and how this is a Legion Family effort

Identify the number of homeless veterans in your community, list stand-down activity, community providers you work with, and fundraising efforts.

Outline program success & impact

Include articles/pictures

Completed coversheet

Nominations by posts and individuals must be sent to department headquarters as soon as possible so that the department will have time to review all nominations received and make the selection of its winners.

**All nominations from departments must arrive at National Headquarters on or before January 15th.
Either the department adjutant or department employment chairman must approve this nomination.**

Approved Signature: _____ Date: _____

Check One: ☐ Department Adjutant ☐ Department Employment Chairman

Desired presentation date at Department Convention: _____

Submit to: **The American Legion**
Attn: National Veterans Employment & Education Commission
1608 K Street NW Washington, DC 20006
Email: VeteransEmploymentandEducation@legion.org

CERTIFICATE OF MERITORIOUS SERVICE

POST ALL-TIME HIGH AWARD

This certificate is awarded to those posts which, by December 31, have enrolled an advance membership (for the year about to begin) equaling or surpassing the post's previous all-time high membership.

DEADLINE: **January 15th**

Please list posts in ascending numerical order.

Date _____

The Department of _____ requests citations for the following posts:

Post No.	Name of Post	Location	All-Time High	No. of advance members Dec. 31 st

Department adjutant

Department

TO: **The American Legion**
 Attn: Internal Affairs & Membership Division
 PO Box 1055
 Indianapolis, IN 46206-1055
 Fax: 317-630-1413
 E-mail: membership@legion.org

DUPLICATE FORM AS NECESSARY

CERTIFICATION FORM

POST HONOR RIBBON

Honor ribbons will be awarded to all posts whose membership, as of December 31, achieves an advance membership (for the year about to begin) equal to or exceeding the final membership for the year ending.

DEADLINE: January 31

Date _____

Please do not list posts; report only the total number of posts within the department, the total number qualifying for the honor ribbon, and the percentage qualifying.

The Department of _____ requests the following honor ribbons:

1. Total number of posts within the department _____
2. Total number of posts qualifying for honor ribbon _____
3. Percentage qualifying (line 2 divided by line 1) _____%

Department adjutant

Department

**TO: The American Legion
 Attn: Internal Affairs & Membership Division
 PO Box 1055
 Indianapolis, IN 46206
 Fax: 317-630-1413
 E-mail: membership@legion.org**



THE AMERICAN LEGION INSTRUCTIONS FOR PRINTING / SHIPPING MEMBERSHIP CARDS & REGISTERS

PURPOSE: To provide National Headquarters necessary instructions for the printing and distribution of cards and rosters for the coming year, including:

1. The percentage of blank cards to be printed for each post.
2. The number of blank cards wanted as a department reserve.
3. The address to which cards should be shipped.
4. Any special shipping instructions....including receipt date, if critical.

BLANK CARDS FOR POSTS: Each Department determines the uniform percentage of blank cards the posts of the department will need for new members. Twenty percent (20%) over the previous year's membership is sufficient for most posts. If a post's previous membership plus twenty percent is less than 25, a minimum of 25 cards will still be printed for the post.

DEPARTMENT RESERVE: A reserve supply of cards is printed for each department. To determine your request, review the amount used last year and adjust accordingly.

DATE: The **April Membership Target Date** will be the cutoff for getting new members, changes, and renewals to National to ensure a preprinted membership card will be produced. The card project will begin in mid-April for distribution to the departments in mid-May to early June. The cards are printed using the department convention schedule unless special requests are made.

ADDRESS: Be sure to give the exact **shipping** address to which cards are to be sent. Please **do not** use a PO Box for a ship to address as tracking or delivery cannot be tracked. Cards are generally shipped via UPS, FedEx or truck freight.

SPECIAL INSTRUCTIONS: Include special instructions with regard to shipment arrival date. This is especially important to foreign departments, since difficulties frequently occur with foreign deliveries.

NOTE: All shipping cartons/packages will be marked for INSIDE DELIVERY if requested by a department and/or past mailings.

The American Legion
Attn: Internal Affairs & Membership
PO Box 1055
Indianapolis, IN 46206-1055
Phone: 317-630-1327
Fax: 317-630-1413
Email: IA@legion.org
Deadline: January 15

REVISED: MAR / 2025



THE AMERICAN LEGION

REQUEST FORM FOR PRINTING & SHIPPING MEMBERSHIP CARDS & REGISTERS

The **APRIL TARGET DATE** is the cutoff for getting new members, changes, and renewals to National HQ to ensure a pre-printed membership card is produced. Cards will be printed, beginning in late April for distribution to the departments beginning in May through June.

Cards will be printed in order of the department convention schedule: **unless a special date request is made**

**** National Headquarters will meet special delivery dates if possible**

1 ☐ Department Convention Order is fine (Delivery to department in mid-May and/or early June)

2 ☐ Special Delivery Date Requested (check box if applicable)

Format: mm/dd/yyyy

(select date by clicking inside above box)

3 % - ** The **percentage of blank cards** needed for your Posts. (Ex. 5%, 15%, 25%)

4 ** The quantity of blank cards needed as a Department reserve

**** Enter a percentage (%) for # 3 // and a total quantity for # 4**

Address to ship membership cards:

Department:

PLEASE DO NOT USE P.O. BOX

Title:

Name:

Street Address:

City, State, Zip:

Special shipping instructions, if any:

Department Adjutant - signature

Date

Format: mm/dd/yyyy

The American Legion

Attn: Internal Affairs & Membership

PO Box 1055

Indianapolis, IN 46206-1055

Phone: 317-630-1327

Fax: 317-630-1413

Email: IA@legion.org

Deadline: January 15

REVISED: MAR / 2025



SONS OF THE AMERICAN LEGION INSTRUCTIONS FOR PRINTING & SHIPPING MEMBERSHIP CARDS & REGISTERS

NOTE: The printing, packaging and shipping of membership cards for the Sons of The American Legion will follow the same process as The American Legion membership cards.

See the below noted exceptions:

- All SAL membership cards will be printed and shipped once The American Legion membership cards have been completed. This should be late-May and/or early-June time-frame.
- Each squadron should be provided with a **20%** blank cards overage provided by the state department headquarters office.
- Please indicate on the "**Request Form for Printing-Shipping SAL Cards & Rosters**" form the quantity of blank SAL membership cards are needed for your department reserve supply.

The American Legion
Attn: Internal Affairs & Membership
PO Box 1055
Indianapolis, IN 46206-1055
Phone: 317-630-1327
Fax: 317-630-1413
Email: IA@legion.org
Deadline: January 15

REVISED: MAR / 2025



SONS OF THE AMERICAN LEGION REQUEST FORM FOR PRINTING & SHIPPING MEMBERSHIP CARDS & REGISTERS

Department

The number of blank Sons of The American Legion membership cards needed for reserve supply:

Address to ship membership cards:

PLEASE DO NOT USE P.O. BOX

Name:

Title:

Street Address:

City, State, Zip:

Special shipping instructions, if any:

Department Adjutant - signature

Date

Format: mm/dd/yyyy

(select date by clicking inside above box)

The American Legion
Attn: Internal Affairs & Membership
PO Box 1055
Indianapolis, IN 46206-1055
Phone: 317-630-1327
Fax: 317-630-1413
Email: IA@legion.org
Deadline: January 15

REVISED: MAR / 2025



THE NATIONAL VETERANS EMPLOYMENT & EDUCATION COMMISSION AWARDS

The first American Legion Veterans Employment and Education Commission Award was established in 1947, and recognized individuals across the country who had established outstanding records in the employment and retention of workers with disabilities. Since that time, categories were added to the current nine award programs.

The Veterans Employment and Education Commission is striving to award all possible pending awards that are available to The American Legion. We implore all departments to continue to submit award nominations for the awards with the hope that we receive all 400 + possible nominations. We are striving to reach 100% participation in this program.

1. EMPLOYER OF VETERANS AWARD - (SMALL)
2. EMPLOYER OF VETERANS AWARD - (MEDIUM)
3. EMPLOYER OF VETERANS AWARD - (LARGE)
4. EMPLOYMENT SERVICE AWARD - (DVOP)
5. EMPLOYMENT SERVICE AWARD - (LVER)
6. EMPLOYMENT SERVICE AWARD - (LOCAL OFFICE)
7. EMPLOYER OF OLDER WORKERS AWARD
8. ENHANCE THE LIVES OF DISABLED PERSON AWARD
9. MICHAEL GUTY HOMELESS VETERANS OUTREACH AWARD

To be considered for the National Award, the deadline for submittals to the Veterans Employment and Education Commission in Washington, DC is **January 15, of the following year**. Example: To be nominated for the 2018 awards the nomination must be in by January 15, 2019.

It is important that the department winners are submitted by this time to ensure that they are considered for the national award to be delivered at the annual National Convention. **Each of the national winners receives a stipend to help defray the cost of their representative's travel to the convention city to accept the award.**

We ask that you submit written correspondence or send an electronic scanned copy in the form of an e-mail to our national headquarters office. Please title your letter '[Title] Awards- [Department name]'.

All entries must be accompanied by an official nomination form (see the following pages) and must not be longer than two pages of narrative. Supporting documents, which may also be submitted with the nomination, must not exceed ten pages.

Submit to: The American Legion
Attn: National Veterans Employment & Education Commission
1608 K Street NW
Washington, DC 20006
Email: VeteransEmploymentandEducation@legion.org

DEPARTMENTS MAY REPRODUCE ALL FORMS FOR WIDER DISTRIBUTION

BELOW IS A RECOMMENDED TIMELINE THAT EACH DEPARTMENT SHOULD FOLLOW

AWARDS ANNUAL TIMELINE											
Multi-state Conference Awards Selected			Department Conventions			National Convention					
JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
All sub- mittals are due to the National Economic Commis- sion NLT JAN 15	Economic Com- mission awards	Serve letter to all posts reminding them to begin search for award nominees			Send follow up letter to posts		National awards are pre- sented for this year	Hasque will post to begin admit- ting nomi- nations for this year	Depart- ment decide for award submitter	Department meets and submits national nominees to national headquarters	
Recommended Department Timeline						Recommended Department Timeline					

1. SEPTEMBER

- ☐ Departments require all posts to begin submitting nominations for the current year

2. OCTOBER

- ### □ Departments Set a Deadline for Submittals from their posts

3. NOVEMBER - DECEMBER

- ### □ Departments meet and submit national nominees to National Headquarters

4. JANUARY

- ALL SUBMITTALS FOR CONSIDERATION FOR THE NATIONAL AWARD ARE DUE NO LATER THAN JANUARY 15 TO THE NATIONAL VETERANS EMPLOYMENT AND EDUCATION COMMISSION**

5. FEBRUARY

- ☐ Veterans Employment and Education Commission processes awards

6. MARCH

- ☐ Veterans Employment and Education Commission Award Subcommittee meets and selects award winners

7. APRIL - MAY

- ☐ Departments should send a letter to all the posts reminding them to begin the search for award nominees for the next year (current calendar year)

8. JUNE - JULY

- ☐ Departments should send a follow-up letter to their posts

9. AUGUST

- ☐ National Awards are presented for the previous year at the National Convention

NATIONAL VETERANS EMPLOYMENT & EDUCATION COMMISSION
1608 K STREET NW
WASHINGTON, DC 20006

E-MAIL A SCANNED COPY
VE&E@LEGION.ORG

DEPARTMENTS MAY REPRODUCE ALL FORMS FOR WIDER DISTRIBUTION

FEBRUARY

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91-92	National Law Enforcement Officer of the Year Award Information Sheet & Form	National Security

The American Legion National Firefighter of the Year Award

Information Sheet

Purpose: The American Legion will give a National Firefighter of the Year Award to a firefighter who has exceeded the requirements expected of his or her position and has shown a distinct pattern of community service and professional achievement. The award, which takes into account heroic acts, will be given annually at the Legion's national convention.

Award: Trip to the National Convention; includes paid travel and hotel expenses. Also includes the presentation of a suitable award and letter of commendation signed by the National Commander.

Nominations: Nomination of one per Department

Deadline: February 1

Mail To: National Security Division
1608 K Street NW
Washington, DC 20006
Email: NS@legion.org

The American Legion National Firefighter of the Year Award Application Form

NOMINEE INFORMATION			
Nominee Name:		Gender:	
Street Address:		Age:	
City, State, Zip		Marital Status:	
Telephone No:		Length of Service as Law Enforcement Officer:	
Agency Name:			
Agency Director Name & Title:			
Nominee's Supervisor & Title:			
Agency Street Address:			
Agency City, State, Zip:			
Agency Telephone No:			
SUBMITTING DEPARTMENT INFORMATION			
Submitting Department:			
Department Law & Order Chairman:			
Street Address			
City, State, Zip			
Telephone No:			

Department Commander Signature: _____

Department Adjutant Signature: _____

Failure to use this form may result in the DISQUALIFICATION of your nominee. It should be the COVER SHEET for your 'packet' of materials supporting your candidate. Include an official photograph of the nominee. ORIGINAL COPY of entire application due NO LATER THAN February 1, to the National Security Division, 1608 K Street NW, Washington, DC 20006. The application packet should conform to instructions in the National Security memorandum entitled: "The American Legion National Law Enforcement Officer of the Year Award," dated June 1, 1997. Additional copies of this memorandum may be obtained by contacting the National Security Division.

**National Security
National Law Enforcement Officer of the Year Award
Information Sheet**

Purpose: To recognize a well-rounded Law Enforcement Officer, who has exceeded, above and beyond, the duty requirements expected of the position held and who exemplifies the virtues of professionalism and dedication and has demonstrated a distinct pattern of community service to the community, state, or Nation; and has also, proven personal dedication to societal security and protection.

Award: Trip to the National Convention; includes paid travel and hotel expenses. Also includes the presentation of a suitable award and letter of commendation signed by the National Commander.

Nominations: Nomination of one per Department

Deadline: February 1

Mailed To: National Security Division
1608 K Street NW
Washington, DC 20006
Email: NS@legion.org

**The American Legion
National Law Enforcement Officer of the Year
Application Form**

NOMINEE INFORMATION			
Nominee Name:		Gender:	
Street Address:		Age:	
City, State, Zip		Marital Status:	
Telephone No:		Length of Service as Law Enforcement Officer:	
Agency Name:			
Agency Director Name & Title:			
Nominee's Supervisor & Title:			
Agency Street Address:			
Agency City, State, Zip:			
Agency Telephone No:			
SUBMITTING DEPARTMENT INFORMATION			
Submitting Department:			
Department Law & Order Chairman:			
Street Address			
City, State, Zip			
Telephone No:			

Department Commander Signature _____

Department Adjutant Signature _____

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. ORIGINAL COPY of entire application due NO LATER THAN February 1, to the National Security Division, 1608 K Street NW, Washington, DC 20006. Application packet should conform to instructions contained in National Security memorandum entitled: "The American Legion National Law Enforcement Officer of the Year Award," dated June 1, 1997. Additional copies of this memorandum may be obtained by contacting the National Security Division.

MARCH

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101	SAL Largest Squadron Certification Form	SAL



Big Twelve Competition Information Sheet

The Big Twelve standings will be taken from the national roll call made at the Commanders' and Adjutants' Conference. Each department must maintain its own respective roll call pledge by having remittance forms and accompanying dues to equal the pledge made, received by National Headquarters during normal business hours on or before the March target date. The department in each category that has pledged the highest percentage and meets this goal will be the winner.

Transmittals in excess of the pledge (at least 90%, not including DMS totals) will not alter the relative standing of the departments; however, defaulting among the Big Twelve by turning in a smaller number than pledged will completely disqualify the department. As departments default, others in the same category will move up. The winner in each category

will be reimbursed for computer equipment purchases up to \$2,000. Department runners-up in all six categories will be reimbursed for computer equipment purchases of up to \$1,000.

The six categories in the Big Twelve Competition are:

Category I -- Departments of 60,000 or more members

Category II -- Departments of 35,000 to 59,999 members

Category III -- Departments of 20,000 to 34,999 members

Category IV -- Departments of 10,000 to 19,999 members

Category V -- Departments of 5,000 to 9,999 members

Category VI -- Departments of 4,999 or less members



CANADIAN FRIENDSHIP AWARD Nomination Report (Information Sheet)

Purpose: To submit nomination(s) for the Canadian Friendship Award.

Authority: Established by Resolution 7, NEC, May 8-9, 1969

Conditions: It shall be awarded to specific individuals who shall be war veterans within the accepted meaning of the term and members of an authentic veterans organization established in Canada.

The award shall be given to individuals in recognition of outstanding service in the field of veterans' affairs and in the development and perpetuation of the spirit of international goodwill and comradeship between The United States and Canada and between their veteran's organization and The American Legion.

Nominations may be made by any member of The American Legion in good standing filed with the Internal Affairs Commission under such rules and regulations as shall be approved for such award.

Nominations: Receipt of award is limited to one (1) per branch and nominations are limited to one (1) per post.

Documentation: Each nomination shall be thoroughly documented (testimonials and other credentials, newspaper clippings, copies of awards, etc.) by the person placing the name in nomination. If space on the nomination form is insufficient, additional pages may be attached for consideration.

The nominator will be responsible for making definite time/place/presentation plans, subject to approval of the nominee for the award.

Distribution: The Department Adjutant shall make distribution of the nomination form in January to the Department Commander, the National Executive Committeemen, and to any other prospective nominator.

Deadline: Nominations must reach National by March 15.

Mail Completed Nomination(s) to:

The American Legion
Attn: Internal Affairs Commission
PO Box 1055
Indianapolis, IN 46206
Fax: (317) 630-1413
E-mail: ia@legion.org

NOMINATION FORM FOLLOWS -- DUPLICATE AS NECESSARY



**The American Legion
Canadian Friendship Award
NOMINATION FORM – PLEASE TYPE OR PRINT LEGIBLY**

Nominee's Full Name: _____

Address: _____

Nominee is a member of _____, an authentic veterans organization in Canada.
[Name of Veterans Organization/Branch or Chapter #]

Nominee is a veteran of the armed Forces of Canada and served during _____, at which time Canada was allied
with the United States of America. [Name of War]

Nominee holds, or has held, the following offices in _____
[Name of Veterans Organization]

[Additional information may be attached to this form]

This nomination for the Canadian Friendship Award is recommended in recognition of outstanding service in the field of veterans affairs and for service and contributions made in the development and preservation of goodwill and comradeship between the veterans organization of the nominee and The American Legion, as evidenced by the following:

[Additional supporting documentation may be attached to this form...the more the better]

**THE RECEIPT OF THIS AWARD IS LIMITED TO ONE PER BRANCH AND
NOMINATIONS ARE LIMITED TO ONE PER POST.**

The member of The American Legion submitting the nomination completes the following section:

Name:	Department:	Post #:	Member ID #:
Street Address:	City	State	Zip Code
Submitting Member's Signature		Date Submitted	

Mail completed nomination form to:

**The American Legion
Attn: Internal Affairs Commission
PO Box 1055
Indianapolis, IN 46206
Fax: (317) 630-1413
E-mail: ia@legion.org**



Direct Membership Renewal Program

Direct membership renewal is a program by which National Headquarters prints and mails membership renewal notices to members of record in participating posts and departments. Although the notices are mailed by National Headquarters, the member still mails his or her dues directly to the post or they can choose to pay online.

The renewal notice makes it easy to pay dues -- and it works. Each year, The American Legion retains over 90% of its membership. To be sure, there are other important methods to support the membership campaign, but without the Direct Renewal Program the enrollment percentage would suffer dramatically.

Cost

The major cost of the Direct Renewal Program is paid by National Headquarters.

Processing Instructions

Early in the year, National Headquarters will forward a supply of preprinted Post Data Report forms that provide information taken from our data system – including the post's dues amount and the address to which the members mail their dues. The department should distribute the forms to their posts and the posts should be instructed to return the form to you with any changes noted. See PDR/SDR processing reminders later in this section.

National will also provide a schedule that outlines when the renewals will be received by the members -- the schedule will also include the corresponding cut-off dates for getting subsequent changes to National throughout the remainder of the membership year.

It is most important that complete and accurate information be provided by these cut-off dates in order to avoid renewals containing incorrect data being sent to members.

Do not hold the initial Post Data Reports until you get them all -- we'd rather you forward them as they arrive, rather than all at once. Waiting until the last minute will create bottlenecks with the workload, which results in delays. The cutoff for receipt at National in time to be updated for the first renewal notice is May 1.

When you receive the updated information from the posts, forward only the Post Data Reports that have changes to National.

Deadline for receipt in time for production of the first renewal notice each year is May 1st.

Mail: The American Legion, Direct Renewal Specialist, PO Box 1954, Indianapolis, IN 46206.

Email: PostSqdnUpdates@legion.org

For Posts in the Renewal Program Last Year

1. If we don't receive a Post Data Report from the department, we will use the existing information on file to mail the renewals.
2. If you want to delete a post from an early mailing, send us an email or a letter requesting to take them off. (Email to: PostSqdnUpdates@legion.org)

For Posts not in the Program

1. If you wish to re-add a post to the renewal mailing, send us an email (PostSqdnUpdates@legion.org) or mail your request to The American Legion, Direct Renewal Specialist, PO Box 1954, Indianapolis, IN 46206.
2. If we receive nothing, the post(s) will continue to be suppressed from the mailing.

Renewals after January 1st

1. All members who haven't been renewed on National's files will receive all mailings after the first of each year.
2. If a post's dues and address are not available, the notices will instruct the member to deliver to the post, or mail to the department headquarters. This will only cause your office more work . . . that's why it's important to have all posts on file.

Helpful Hints

1. Make sure to retain documentation of all of the updates and additions that you forward to national headquarters; retaining a copy of the Post Data Report is the best option.
2. As closely as possible, the additions and updates should be returned to national headquarters no later than 45 days prior to the receipt date for the first notice. Give your office plenty of advance time to process the information.
3. It is not possible to print a renewal notice with variable dues, such as: \$30.00 before November; \$35.00 after November 1.
4. Posts should not use the name of an individual in the return address. If that particular individual's membership status changes to anything other than ACTIVE, the Direct Renewal Notices for that post will be suspended until updated address information is forwarded to National. Possible future confusion will be avoided by using the permanent address of the post building, or even better, a post office box number. In completing the address section, the first line of the address will always contain, "American Legion Post" followed by the post number.

Example:	CORRECT	AVOID IF POSSIBLE
	American Legion Post 0110	American Legion Post 0110
	PO Box 4	c/o John Doe
	Any Town, State 12345	999 Suburban Ln
		Any Town, State 12345

5. Only return Post Data Reports having updates to National Headquarters. There's no need to submit the form if there are no changes to report.



INTERNATIONAL AMITY AWARD Nomination Report (Information Sheet)

Purpose: To submit nomination(s) for the International Amity Award.

Authority: Established by Resolution 21, NEC, October 25-27, 1961 and amended by Res. 9, NEC, October 12-13, 1966.

Conditions: It shall be awarded to specific individuals who shall be war veterans within the accepted meaning of the term and members of an authentic veterans organization established in the territory of any of the nations associated as wartime allies of the United States of America.

The award shall be given to individuals in recognition of outstanding service in the field of veterans affairs and for service and contributions made in the development of international goodwill and comradeship between The United States, the ally and between their veterans organization and The American Legion.

Nominations may be made by any member of The American Legion in good standing filed with the National Trophies, Awards and Ceremonials Committee under such rules and regulations as shall be approved for such award.

Nominations: Nominations are limited to one (1) per post.

Documentation: Each nomination shall be thoroughly documented (testimonials and other credentials, newspaper clippings, copies of awards, etc.) by the person placing the name in nomination. If space on the nomination form is insufficient, additional pages may be attached for consideration.

The nominator will be responsible for making definite time/place/presentation plans, subject to approval of the nominee for the award.

Distribution: The Department Adjutant shall make distribution of the nomination form in January to the Department Commander, the National Executive Committeemen, and to any other prospective nominator.

Deadline: Nominations must reach National by March 15.

Mail Completed Nomination(s) to:

The American Legion
Attn: Internal Affairs Commission
PO Box 1055
Indianapolis, IN 46206
Fax: (317) 630-1413
E-mail: ia@legion.org

NOMINATION FORM FOLLOWS -- DUPLICATE AS NECESSARY



**The American Legion
International Amity Award
NOMINATION FORM – PLEASE TYPE OR PRINT LEGIBLY**

Nominee's Full Name _____

Address _____

Nominee is a veteran (in the accepted meaning of the term) of the military forces of _____, and served during _____, during which time that nation
(Country Name) (Name of War)
was allied with the United States of America. The nominee is a member of _____, an authentic veterans organization of said nation.
(Name of veterans organization)

The award is recommend in recognition of outstanding service in the field of veterans affairs and for service and contributions made in the development of international goodwill and comradeship between his/her organization and The American Legion as is evidenced by the following:

(Additional supporting documentation may be attached to this form...the more the better)

NOMINATIONS ARE LIMITED TO ONE PER POST.

The member of The American Legion submitting the nomination completes the following section:

Name:	Department:	Post #:	Member ID #:
Street Address:	City:	State:	Zip Code:
Submitting Member's Signature		Date Submitted	

Mail Completed Nomination(s) to:

The American Legion
Attn: Internal Affairs Commission
PO Box 1055
Indianapolis, IN 46206
Fax: (317) 630-1413
E-mail: ia@legion.org

DUPLICATE AS NECESSARY



SONS OF THE AMERICAN LEGION LARGEST SQUADRON CERTIFICATION FORM

An award plaque will be presented annually, as applicable, to the Detachment with the largest squadron membership nationwide during the Sons of The American Legion (SAL) National Convention.

This form must be completed, certified, and submitted by the SAL Detachment (state) Adjutant. Each Detachment should identify its largest Squadron based on the previous year's membership, using December 31 as the official cut-off date.

Note: Final membership totals will be verified and determined by The American Legion National Headquarters.

Detachment

Membership Year

Squadron Name

Squadron No.

Squadron Location (City)

Squadron Membership

Detachment Adjutant

Type First and Last Name to serve as digital signature

Date

Format: mm/dd/yyyy (select date by clicking inside box)

Send completed award forms by one of the below methods:

The American Legion
Attn: SAL Awards
700 N. Pennsylvania Street
Indianapolis, IN 46204
Phone: 317-630-1205
Email: SALawards@legion.org
Deadline: **MAR 31**

REVISED: MAR / 2026

APRIL

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108	National Convention Housing Room Allotment Form (2028)	Convention
109	National Convention Meeting Space Requirements Form (2028)	Convention

Report of Site and Dates of Department American Legion Baseball Tournament

Information Sheet

- Purpose:** To inform National Headquarters of sites and dates of Junior and Senior Department Baseball Tournaments.
- Report:** Information is provided to Professional Scouts and College Coaches. This information also allows us to contact the local chairman to help generate publicity of the tournament.
- Deadline:** Mail or fax by **April 15**. (We recognize that in a few instances the site of a tournament may be on a home and home basis – (eastern champion vs western champion). We still require starting and ending dates of tournament. Thank you.
- Mail to:** Program Manager for Baseball
Americanism Division
The American Legion
PO Box 1055
Indianapolis, IN 46206
Fax: 317-630-1369
baseball@legion.org

A copy of the reporting form follows. Mail original and retain one copy for your files.



Deadline By April 15

104

Deadline By April 15

105

Department Baseball Rules

A copy of the Department American Legion Baseball rules are required to be on file at national by **April 15** for the current season.

Please forward an email copy to:
baseball@legion.org or

five (5) copies of
the Department Baseball rules to:

**American Legion Baseball
Americanism Division
The American Legion
P.O. Box 1055
Indianapolis, IN 46206**



CERTIFICATION FORM
DISTRICT COMMANDER
RACE-TO-THE-TOP AWARD

DEADLINE: MAIL TO REACH NATIONAL HEADQUARTERS ON OR BEFORE APRIL TARGET DATE

This is to certify the below listed district commander whose district membership on March 31 represents the greatest percentage over the previous year's final membership, and we have transmitted the information to National Headquarters for receipt by the April target date.

Cannot be less than 100 percent to qualify.

Competition will be divided into five categories based on the membership of the district without regard to geographic locations. District commanders will compete in each of the following categories based on the previous year's final totals.

Category I Districts of 15 to 1,499
Category II Districts of 1,500 to 2,999
Category III Districts of 3,000 to 4,999

Category IV Districts of 5,000 to 7,499
Category V Districts of 7,500 and above

The national convention trip will be given to the district commander and guest in each category whose district membership, transmitted to National Headquarters no later than the April target date, represents the greatest percentage over the final membership of the previous year.

Name _____ District No. _____ Category _____

Address _____ Phone _____

City/State/Zip _____

Previous year final membership _____ Current year membership _____

Percentage of current year increase over previous year's final membership _____

Number of posts within the district _____

Department

Department Adjutant

Date

TO: **The American Legion**
Attn: Internal Affairs & Membership Division
PO Box 1055
Indianapolis, IN 46206
Fax: 317-630-1413
E-mail: membership@legion.org



NATIONAL CONVENTION HOUSING
ROOM ALLOTMENT
2028 NATIONAL CONVENTION – COLUMBUS, OHIO

Deadline: April 30, 2027

Subsequent to the membership target date in May of 2027, the National Convention & Meetings Office will assign housing to each Department for the 2028 National Convention in Columbus, Ohio. Please indicate the quantity and type of rooms you desire to contract for your Department.

Your contract will be prepared as closely as possible to the room types you have submitted. However, your room types and number of rooms may be altered based upon your assigned hotel's room inventory. Your numbers should reflect 65% two bedded and 35% kings of your total contracted room block; however, could alter with assigned hotel. Kindly provide us with your Department's day-by-day flow in the grid below:

	Tues 8/22	Wed 8/23	Thurs 8/24	Fri 8/25	Sat 8/26	Sun 8/27	Mon 8/28	Tues 8/29	Wed 8/30	Thurs 8/31	Fri 9/1	Sat 9/2
King (1bed)												
Double (2 beds)												
Handicap Accessible Room												
One- Bedroom Suite												
Two- Bedroom Suite												
Total	0	0	0	0	0	0	0	0	0	0	0	0

Special Requests: _____

Department: _____

Department Adjutant: _____ Date: _____

Submit form via email to conventiondivision@legion.org.

**Form should not be sent to any hotel or outside entity.*



MEETING SPACE REQUESTS 2028 NATIONAL CONVENTION-COLUMBUS, OHIO

Deadline: April 30, 2027

Subsequent to the membership target date in May 2027, the National Convention & Meetings Office will assign housing to each Department for the National Convention. Along with the Room Allotment document, this form should also be submitted to the National Convention & Meetings Office via email conventiondivision@legion.org.

Please denote the meeting space information listed below concerning the needs for your department within a contracted hotel. In order to better serve your function space allocation, please indicate **ALL** your needs below:

Meeting/Caucus Space

☐ Yes

☐ No

If yes, please provide the exact requirements to include the following: date, length of time and set-up.
(i.e., Thursday, August 24, 8am-5pm, Theater Style seating for 100; Head table for 4)

Food & Beverage Requirements

☐ Yes

☐ No

If yes, please provide the exact requirements to include the following: date, length of time and set-up.
(i.e., Thursday, August 24, 8am-10am, Breakfast for 300; Rounds of 8)

We will attempt to assign your department to a hotel that meets your stated requirements. It will be the Department's responsibility, once a hotel is assigned, to communicate your needs to the hotel's event manager by the due date. If we have to assign your department to a hotel that does not meet your meeting space requirements, we will work with you to find the needed space to host your function(s). This space could, therefore, be in the Headquarters Hotel or in the Convention Center.

Department: _____

Department Adjutant: _____ Date: _____

Submit form via email to conventiondivision@legion.org

**Form should not be sent to any hotel or outside entity.*

MAY

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BRONZE BRIGADE

NEW MEMBER RECRUITER AWARD

CERTIFICATION FORM

Send the completed form to department headquarters on or before the May target date. Posts should retain a copy for their records.

The following member in the Department of _____ qualifies for the Bronze Brigade Award for enrolling 15 to 24 new members into The American Legion by the May target date.

Bronze Brigadiers receive a bronze patch and a certificate.

Name _____ Post Number _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Member ID _____

Number of new members enrolled (15 to 24) _____

Department Adjutant Signature

Post Adjutant Signature

Date

Address

Date

Department reminder: Fax a copy of this form to 317-630-1413 or email it to membership@legion.org, along with a copy of the list of new members signed up to National Headquarters, on or before May 31.

USE ADDITIONAL SHEETS IF NECESSARY



2028 MEMBERSHIP YEAR DEPARTMENT PER CAPITA AMOUNT Information/Reporting Form

Purpose of Report: To notify National Headquarters of the Department's per capita portion of the annual membership dues. This information must be reported in support of the National Paid-Up-For-Life Program, in addition to being used for calculation of all Department per capita reimbursement. It is also maintained for informational/historical purposes in National's database files. **All Departments are asked to submit this form annually.**

Deadline: **May 1st** (must be received at National Headquarters by this date)

Mail: The American Legion
Attn: Member Support Services
PO Box 1954
Indianapolis, IN 46206

Email: PostSqdnUpdates@legion.org

NOTE: Department Per Capita is the portion retained by the Department for each member; it doesn't include National's portion. Please select one of the following below

- ☐ Our Department per capita will remain at \$ _____ for the 2028 membership year.
- ☐ Change our Department per capita to \$ _____ for the 2028 membership year.
(If a change is reported, it will be entered with the effective date of July 1, 2027, unless noted otherwise by the Department.)
- ☐ An annual dues increase for our Department is currently under consideration and will be determined at our Department Convention. Notification of the 2027 dues Headquarters no later than _____ .
Date: mm/dd/yyyy (select date by clicking inside box)

I certify that the information provided above is accurate. Department dues information reported **does not** include the National per capita portion.

Department Adjutant - signature
Type First and Last name to serve as digital signature

Department

Date: mm/dd/yyyy (select date by clicking inside box)

NOTE: If the Department Per Capita changes at any other time during the year, it should be reported immediately to National Headquarters.

CERTIFICATION OF DEPARTMENTS ACHIEVING
**ALL TARGET DATES DURING THE
MEMBERSHIP YEAR**

Purpose: This recognition is for any department that meets or exceeds each target date up to and including the May (100 percent) membership target date published for the National Points Awards Program for the current membership year. The national commander or a member of their staff will recognize the department at the national convention for meeting all targets using traditional membership methods.

Department adjutants must nominate their departments before the delegate strength reporting date, approximately 30 days before the beginning of the national convention.

The Department of _____ requests recognition at the national convention for meeting all target dates for the membership year.

<u>Target Month</u>	<u>Target</u>	<u>Actual</u>
September	50%	
October	55%	
November	65%	
December	75%	
January	80%	
February	85%	
March	90%	
April	95%	
May	100%	

Department Adjutant

Department

Date

TO: **The American Legion**
Attn: Internal Affairs & Membership Division
PO Box 1055
Indianapolis, IN 46206
Fax: 317-630-1413
E-mail: membership@legion.org

CERTIFICATION FORM

DISTRICT COMMANDER ACHIEVEMENT AWARD AND DISTRICT HONOR RIBBON

Report only those districts exceeding their previous year's membership by at least the number of posts in the district.

Use this form as a cover and attached sheets with the following information:

- District commander's name and address
- District name or number
- District final previous year membership as of December 31
- Number of posts in district
- District current year membership as of May target date

DEADLINE: MAIL THIS FORM ON OR BEFORE MAY 31

I certify the following information concerning district membership for the previous membership year and current membership year in this department is correct.

Department Adjutant Printed Name

Department Adjutant Signature

Date

TO: **The American Legion**
Attn: Internal Affairs & Membership Division
PO Box 1055
Indianapolis, IN 46206
Fax: 317-630-1413
E-mail: membership@legion.org

CERTIFICATION FORM

DISTRICT COMMANDER NEW POST ACHIEVEMENT AWARD

DEADLINE: This form must reach National Headquarters on or before May 31. Post charter applications must already be on file by the May target date.

This is to certify the below listed district commander has created _____ new post(s) in District _____. This also certifies a new temporary post charter is on file at National Headquarters.

Name _____ District No. _____

Address _____

City/ State/Zip _____

New post numbers _____

Department Adjutant

Department

Date

TO: **The American Legion**
Attn: Internal Affairs & Membership Division
PO Box 1055
Indianapolis, IN 46206
Fax: 317-630-1413
Email: membership@legion.org

GOLD BRIGADE

FIFTH CONSECUTIVE YEAR AWARD

CERTIFICATION FORM

Departments must submit this form to National Headquarters by the last day of May.

The following member in the Department of _____ qualifies for the prestigious Fifth Consecutive Year Gold Brigade Award for enrolling 50 or more new members into The American Legion by the May target date.

A Legionnaire may only qualify for this award once every five years (except for the 10th year).

Note: This navy blue blazer replaces the gold blazer of previous years.

Check one:

Men's blazer (cut) ☐ Short ☐ Regular ☐ Long ☐ Extra Long

Specify even sizes 36-58 _____

Ladies' blazer (cut) ☐ Regular

Specify even sizes 0-28 _____

Name _____ Member ID _____

Phone (_____) _____ Post Number _____

Years of being a Gold Brigadier (specify year range) _____ to _____

Certified:

Department Adjutant Signature

Date

Department reminder: Fax a copy of this form to 317-630-1413 or email it to membership@legion.org, along with a copy of the list of new members signed up to National Headquarters, on or before May 31.

USE ADDITIONAL SHEETS IF NECESSARY

GOLD BRIGADE NEW MEMBER RECRUITER AWARD CERTIFICATION FORM

Send the completed form to department headquarters on or before the May target date. Posts should retain a copy for their records.

The following member in the Department of _____ qualifies for the Gold Brigade Award for enrolling 50 or more new members into The American Legion by the May target date.

Attach the list of names with each nomination form.

First-time qualifiers receive a Gold Brigade cap pin, certificate, Gold Brigade patch, and the choice of a jacket or sweater or polo shirt with the Gold Brigade logo.

Second to fourth time qualifiers receive a Gold Brigade certificate, hash mark for the sleeve, and the choice of either another Gold Brigade jacket or sweater or polo shirt with the Gold Brigade logo.

Seventh time and beyond (except fifth, sixth or tenth time) qualifiers receive a Gold Brigade certificate, hash mark for the sleeve, and a choice of either another Gold Brigade jacket or sweater or polo shirt with the Gold Brigade logo and a \$150 check.

Check the appropriate box(es):

A ☐ First Gold Brigade Award B ☐ Second to Fourth Award (specify occurrence) _____

C ☐ Seventh time and beyond (specify occurrence) _____

Check item and select size from drop down menu:

☐ Ladies's Jacket Choose One	☐ Ladies's Polo Choose One	☐ Men's Jacket Choose One	☐ Men's (Tall) Jacket Choose One
☐ Men's Polo Choose One	☐ Unisex 1/2 Zip Sweater Choose One		

Name _____ Post Number _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Member ID _____

Number of new members enrolled (Minimum 50) _____

Department Adjutant Signature/Date

Post Adjutant's Signature/Date

(date cannot be after the MAY target date)

Post Address

Department reminder: Fax a copy of this form to 317-630-1413 or email to membership@legion.org along with a copy of the list of new members signed up to National Headquarters on or before MAY 31.

USE ADDITIONAL SHEETS IF NECESSARY

GOLD BRIGADE

SIXTH CONSECUTIVE YEAR AWARD

CERTIFICATION FORM

The following member in the Department of _____ qualifies for the Sixth Consecutive Year Gold Brigade Award for enrolling 50 or more new members into The American Legion by the May target date.

This award is a \$150 check and a Master Recruiter American Legion cap, along with a Gold Brigade plaque, cap pin, and hash mark.

Type or print, making sure that all information is complete to help avoid processing delays:

Name _____ Member ID _____

Phone (_____) _____ Post Number _____ Post city _____

Years qualifying for Gold Brigade _____

Number of new members enrolled (minimum 50) _____

Check crown type: { } Regular { } Fort Knox { } Women's Crown

{ } Lined or { } Unlined Cap Size _____

Mandatory insignia { } Yes { } No

If yes, please list _____

Certified:

Department Adjutant Signature

Date

Department reminder: Fax a copy of this form to 317-630-1413 or email it to membership@legion.org, along with a copy of the list of new members signed up to National Headquarters, on or before May 31.

USE ADDITIONAL SHEETS IF NECESSARY

GOLD BRIGADE

TENTH CONSECUTIVE YEAR AWARD

CERTIFICATION FORM

Departments must submit this form to National Headquarters by the last day of May.

The following member in the Department of _____ qualifies for the prestigious Tenth Consecutive Year Gold Brigade Award for enrolling 50 or more new members into The American Legion by the May target date.

The recipient will receive a navy blue blazer with the tenth-year Gold Brigade logo, tenth-year cap pin, hash mark, and Gold Brigade plaque.

A Legionnaire may only qualify for this award on their tenth consecutive year.

Note: This navy blue blazer replaces the gold blazer of previous years.

Check one:

Men's blazer (cut) { } Short { } Regular { } Long { } Extra Long

Specify even sizes 36-58 _____

Ladies' blazer (cut) { } Regular

Specify even sizes 0-28 _____

Name _____ Member ID _____

Phone (_____) _____ Post Number _____

Years of being a Gold Brigadier (specify year range) _____ to _____

Certified:

Department Adjutant Signature

Date

Department reminder: Fax a copy of this form to 317-630-1413 or email it to membership@legion.org, along with a copy of the list of new members signed up to National Headquarters, on or before May 31.

USE ADDITIONAL SHEETS IF NECESSARY



Membership Tacks (Order Form)

Mail To: Membership Division
The American Legion
P.O. Box 1055
Indianapolis, IN 46206-1055
Email: membership@legion.org
Fax: 317-630-1413

TO: DEPARTMENT ADJUTANTS

PURPOSE: MEMBERSHIP TACKS ORDER FORM - _____ MEMBERSHIP YEAR
(Recruiter, 100% Post Commander & Adjutant)

These tacks are available to every department for use in their membership program; every tack will have the year indicated on it to distinguish it from previous years.

Criteria for awarding these tacks is at the discretion of the department.

Estimate your total requirements as closely as possible, using the order form below...it may be necessary to limit the number we send in order to have some for everyone. If it is necessary to reduce your quantity requested, you can check at a later date in case we have excess inventory.

Depending on available inventory, we plan on shipping the tacks **not later than August 1st.**

Recruiter Tack: _____ Quantity Requested

100% Post Commander Tack: _____ Quantity Requested

100% Post Adjutant Tack: _____ Quantity Requested

(Date)

(Department Name)

(Authorized Signature)

RETURN TO NATIONAL HEADQUARTERS BY MAY 1, 2026

ATTENTION!

2027 PDR / SDR Processing Reminders

In order to improve the processing and accuracy of the Post and Squadron Data Reports, we ask that you review the following reminders:

- Do not create/submit your own reporting forms; please only use the PDR/SDR forms provided by National. Improper or invalid forms will be returned.
- If there aren't any changes to the information found on the form, there's no need to submit it to National. If you choose to forward it for documentation purposes, write **NO CHANGES** at the top of the form. It's a waste of time for us to review forms that have no updates - - since it still requires us to look at every field on numerous screens. Marking them as **NO CHANGES** will allow us to simply attach them to the Post record with no review.
- Only enter data in fields that are changing – for example, if the Dues Remittance address is changing but the dues are remaining the same, **ONLY** enter the new remittance address – don't enter the dues rate if it's not changing. Entering data that isn't actually a change causes additional processing time and delay.
- Make sure the Department and Post information is correct and not written over or covered up.
- Please verify any dues Effective Dates other than July 1, 2026 or January 1, 2027, then make a note of the verification. We question those and usually end up contacting the Department, which delays processing.
- Mail the forms to: **The American Legion, ATTN: Member Support Services, PO Box 1954, Indianapolis, IN 46206**
- If you're emailing the forms, send them to PostSqdnUpdates@legion.org so that they get logged and assigned to the correct area.
 - DO NOT use the MSSforms address since they would get mixed in with thousands of Member Data Forms, transfers, deceased notices, etc. National can't be responsible for mis-directed reports.
 - All Post Officer updates **SHOULD** be directed to MSSforms@legion.org since it's a change to an individual's record. Do not send your Post Officer Updates to the PostSqdnUpdates mailbox.
- The deadline at National for processing to be completed prior to printing the first 2027 renewal notice is May 1st. Please submit the forms as they're received; don't hold them until you have a large batch. Holding them creates a processing backlog which then delays printing and mailing of the renewal notices.
- If a **replacement form** is needed due to loss or damage to the original, or subsequent changes after an initial report is submitted, please use the generic form provided by Internal Affairs. These will be sent via email to all Departments for use or distribution on request. If you didn't get it or can't locate it, please contact Internal Affairs at IA@legion.org. Make sure to follow the directions on the form.



THE AMERICAN LEGION
POST DATA REPORT (PDR) - **UPDATES ONLY**
_____ MEMBERSHIP YEAR

Department _____ Post No. _____ District/County _____

IMPORTANT INFORMATION

THIS FORM SHOULD ONLY BE SUBMITTED IF UPDATES ARE REQUIRED TO THE INFORMATION BELOW.

UPDATES:

- 1) Post Home (Physical) Address:

- 2) Post Mailing Address:

- 3) Post Dues Mailing Address:

Note: If the post dues mailing address contains a member name or is being sent to a member's home address as the contact, provide the member's ID number. Member No. _____

- 4) Post Dues Update:
Note: All dues rates will be effective as of **July 1st** unless an alternate date is entered. This is the amount shown on annual renewal notices.
- Dues will be \$ _____ . _____
Effective Date: _____ / _____ / _____
Month Day Year

- 5) Post Telephone Number: _____ - _____ - _____

- 6) Post Email Address: _____

- 7) Post Website or Facebook Page: _____

- 8) Post Meeting Date & Time Schedule:
(Example: 2nd Wednesday of each month @ 7:00 PM) _____

- 9) ☐ Post has a SAL Squadron
- 12) ☐ Smoking permitted ☐ No Smoking

- 10) ☐ Post has a Legion Riders Chapter

- 11) ☐ Facilities are available to rent for events
- 13) ☐ Post has a Club Room (food/drink)

Name _____ Date _____
Type First and Last Name to serve as your digital signature. Format: mm/dd/yyyy (select date by clicking in box)

Title _____
Authorized Representative

INFO: Return forms to PostSqdnUpdates@legion.org to be logged and assigned to the correct area.

NOTICE
It is requested that any updated Post Data Reports (PDRs) be submitted through your state’s American Legion Department Headquarters office. For additional information or to locate contact details for your state department, please visit: www.legion.org/about/organization/departments

CERTIFICATION FORM

POST MEMBERSHIP RETENTION AWARD

The Post Membership Retention Award is for posts that meet the minimum number of members to maintain a charter within their respective department. Any post that achieves a renewal rate of at least 95% by the May target date will qualify for this award.

Date _____

DEADLINE: Posts will receive the following award based on their percentage by the May target date:

The Department of _____ submits the following posts for the Post Membership Retention Award:

Legal name of post/post number	Percentage as of May target

Department adjutant

Department

TO: **The American Legion**
Attn: Internal Affairs & Membership Division
PO Box 1055
Indianapolis, IN 46206
Fax: 317-630-1413
E-mail: membership@legion.org

DUPLICATE THIS FORM AS NECESSARY

RECRUITER OF THE YEAR

NOMINATION FORM

DEADLINE: This form must reach department headquarters by the May target date and National Headquarters by May 31

In the Department of _____, the top new member recruiter of membership enrolled for current membership year as of May target date, and transmitted to National Headquarters, is:

1. Name _____ Post _____ Member ID _____

Address _____

City / State / ZIP _____

Phone (_____) _____

Number of new members enrolled (minimum 10) _____

Attach list of names and ID numbers of new members.

The next highest new member recruiter (make additional copies if needed):

2. Name _____ Post _____ Member ID _____

Address _____

City / State / ZIP _____

Phone (_____) _____

Number of new members enrolled (minimum 10) _____

Attach list of names and ID numbers of new members.

Post Adjutant

Department Adjutant

Date

Date

TO: **The American Legion**
 Attn: Internal Affairs & Membership
 Division PO Box 1055
 Indianapolis, IN 46206
 Fax: 317-630-1413
 E-mail: membership@legion.org



2028 MEMBERSHIP YEAR SAL DETACHMENT PER CAPITA AMOUNT Information / Reporting Form

Purpose of Report: To notify National Headquarters of the SAL Detachment's per capita portion of the annual membership dues. This information must be reported in support of the SAL Transmittal process and is also used for calculation of the online transmittal per capita reimbursement. The information is also maintained for informational/historical purposes in National's database files. **All Departments are asked to submit this form annually.**

Deadline: **May 1st** (*must be received at National Headquarters by this date*)

Mail: The American Legion
Attn: Member Support Services
PO Box 1954
Indianapolis, IN 46206

Email: PostSqdnUpdates@legion.org

NOTE: Detachment Per Capita is the portion retained by the Detachment for each member; it doesn't include National's portion. Please select one of the following:

☐ Our Detachment per capita will remain at \$ _____ for the 2028 membership year.

☐ Change our Detachment per capita to \$ _____ for the 2028 membership year.

(If a change is reported, it will be entered with the effective date of July 1, 2027, unless noted otherwise by the Department.)

I certify that the information provided above is accurate. Detachment dues information reported **does not** include the National per capita portion.

Department Adjutant - signature
Type First and Last name to serve as digital signature

Department

Date: mm/dd/yyyy (select date by clicking inside box)

NOTE: If the SAL Detachment per capita changes at any other time during the year, it should be reported by the Department immediately to National Headquarters.



SONS OF THE AMERICAN LEGION

SQUADRON DATA REPORT - **UPDATES ONLY**

MEMBERSHIP YEAR

Detachment _____ Squadron No. _____ District / County _____

IMPORTANT INFORMATION

THIS FORM SHOULD ONLY BE SUBMITTED IF UPDATES ARE REQUIRED TO THE INFORMATION BELOW

UPDATES:

1) Squadron Home (Physical) Address:

2) Squadron Mailing Address:

3) Squadron Dues Mailing Address:

Note: If the squadron dues mailing address contains a member name or is being sent to a members home address as the contact, provide the members ID number.

Member ID # _____

4) Squadron Dues Update:

Note: All dues rates will be effective as of July 1st unless an alternate date is entered. This is the amount shown on annual renewal notices.

Dues will be \$ _____ . _____

Effective Date: _____ / _____ / _____
Month Day Year

5) Squadron Telephone Number:

NOTE: Please do not use personal phone number of members.

_____ - _____ - _____

6) Squadron Email Address:

7) Squadron Website or Facebook Page:

8) Squadron Meeting Date & Time Schedule

(Example: 2nd Wednesday of each month @ 7:00 PM)

Name _____

Type First and Last Name to serve as your digital signature.

Date _____

Format: mm/dd/yyyy (select date by clicking in above box)

Title _____

Authorized Representative

INFO: Return forms to PostSqdnUpdates@legion.org to be logged and assigned to the correct area.

NOTICE

It is requested that any updated Squadron Data Reports (SDRs) be submitted through your state's American Legion Department Headquarters office. For additional information or to locate contact details for your state department, please visit: www.legion.org/about/organization/departments

SILVER BRIGADE

NEW MEMBER RECRUITER AWARD

CERTIFICATION FORM

Send the completed form to department headquarters on or before the May target date. Posts should retain a copy for their records.

The following member in the Department of _____ qualifies for the Silver Brigade Award for enrolling 25 to 49 new members into The American Legion by the May target date.

Silver Brigadiers receive a patch, pin, and a certificate.

Name _____ Post Number _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Member ID _____

Number of new members enrolled (25 to 49) _____

Department Adjutant Signature

Post Adjutant Signature

Date

Address

Date

Department reminder: Fax a copy of this form to 317-630-1413 or email it to membership@legion.org, along with a copy of the list of new members signed up to National Headquarters, on or before May 31.

USE ADDITIONAL SHEETS IF NECESSARY

JUNE

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129	National American Legion College Information Sheet	Internal Affairs
130-131	National Commander's Official Visitation Information & Request Form	Executive Office
132-133	Protocol Guidelines for National Commander's Travels & Visitations	Executive Office



National College Online Information
EST. 1944

Course Description: The National American Legion College (NALC) develops leaders who listen with empathy, lead with integrity, and serve with humility and purpose. As The American Legion's premier leadership program, NALC prepares Legionnaires to strengthen posts, support districts, and advance the mission of the organization through servant leadership, sound judgment, and practical application.

Course Structure: The course runs one full week and requires full attendance. National and department funds cover tuition and associated costs. Applicants must complete the online Basic Training Course before applying. Ideal candidates bring post-level leadership experience. District or department-level experience strengthens an application.

Submit Deadline: Complete the online NALC application through the portal by **June 15**. Applications proceed through department endorsement within the portal before National review. Email submissions are not accepted.

Application Link: <https://register.legion.org/nalc-application>

Website Link: [American Legion College | The American Legion](#)



Department Request for National Commander's Official Visit

Information Sheet

Purpose: To request the National Commander to visit your Department

Deadline: On or before **JUNE 1**

Mail to: Office of the National Commander
The American Legion
PO Box 1055
Indianapolis, IN 46206-1055

Fax: 317-630-1223

Email: natlcmdr@legion.org

NATIONAL COMMANDER'S OFFICIAL VISIT REQUEST

Three date choices **must** be submitted

Department of _____

	1 st Choice	2 nd Choice	3 rd Choice
Requested Dates:			
Event: <i>(specify conference, convention, post visits, other)</i>			
City:			
Housing: <i>(lodging name, address, phone number, if known at this time)</i>			
Time & Place of <u>first</u> scheduled function:			
Time & Place of <u>last</u> scheduled function:			
Arrival City:			
Departure City:			

Number of Press Kits Required: _____ *(Media & Comm provides five unless otherwise requested)*

Additional Notes:

Signature of Department Adjutant _____

**PROTOCOL GUIDELINES FOR
NATIONAL COMMANDER'S TRAVELS AND VISITATIONS
AS ADOPTED BY THE NATIONAL EXECUTIVE COMMITTEE**

May 8-9, 2019

1. Utilization of Time

- a. National issues take priority on travel and visitations.
- b. National Commander's schedule must be flexible and is subject to change.
- c. Due to airline flight schedule reductions, to best utilize the National Commander's travel time and to minimize travel expenses, it is recommended that adjacent Departments try to "regionalize" their visitation schedule.

2. Daily Time Frames

- a. It is recommended that the National Commander's day start no earlier than 7:00 A.M.
- b. It is recommended that the National Commander have 1.5 to 2.0 hours each afternoon at his hotel/motel to prepare for the evening's activities and to respond to communication needs.
- c. It is recommended that the National Commander be free to return to his hotel room no later than 10:00 P.M. and retire for the night.

3. Schedule of Events

- a. It is recommended that a reasonable amount of time should be scheduled at each location.
- b. There should be reasonable travel time between events.
- c. Do not alter the finalized itinerary.
- d. Upon arrival, it is recommended that 1.0 to 2.0 hours be allocated to allow the National Commander's to prepare for the first event.
- e. Partial days of visitation should be reflected in schedule. It is recommended that informal gatherings such as breakfast, lunch or dinner be utilized prior to departure or immediately after arrival.
- f. It is recommended that meetings with the Governor, Veterans Affairs Secretary, Adjutant General, Senators, Congressmen and other notable dignitaries be scheduled for current events driven issues.

4. Transportation

- a. Transportation should be provided to and from points of arrival and departure.
- b. Transportation should be provided at all times, regardless of the hour of the day or night.
- c. American Legion staff or American Legion volunteers should provide transportation.
- d. Sufficient number and size of vehicles should be provided to transport the National Commander, the National Commander's Aide, four pieces of large- size luggage, briefcases, and computer and case.

5. Hotel Rooms and Additional Expenses

- a. In large hotels, you should request rooms near, but not directly next to an elevator.
- b. In small hotels, you should request rooms near entrance.
- c. Ensure room preference, i.e. nonsmoking versus smoking or handicap versus non-handicap.
- d. If no elevators are on the property, you should request room on the ground level floor.
- e. The National Commander's and his Aide's rooms should be adjoining rooms.
- f. Personnel of the Host Department, regardless of the absence or presence of the Aide, always handle the luggage of the National Commander's party.
- g. It is recommended that accommodations for two consecutive nights with one day laundry service be used.
- h. The National Commander is responsible for transportation expenses incurred by the commander and the aide to visit hosting departments. Often, the hosting department will pay hotel expenses for both the National Commander and aide; however, if the department does not pay, the national commander will. The hosting department is responsible for transporting the national commander and aide from entry point and back at the end of visit. It is the hosting department's responsibility to pay for all expenses incurred while hosting/providing hospitality to the national commander and aide including, but not limited to: meals served at Legion events or restaurants; transportation expenses while in the host department; and other routine hospitality expenses.

6. Visitation Requests

- a. Requests for official department visits for the National Commander should be submitted in detail and in a timely fashion toward deadline.
- b. Itinerary of scheduled activities should be submitted to the National Commander's office in detail and in a timely fashion toward deadline.
- c. National programs do take priority over department visitations. Do not request time frames that include "Dates To Be Avoided," as listed in National's request notification.

7. Host and Department Guest

- a. The National Commander is the guest of the Department.
- b. The Department is the official host for the National Commander.
- c. The National Executive Committeeman should have the privilege of introducing the National Commander.

8. Disputes

The NEC has the final word on any disputes concerning the above recommendations.

9. Annual Distribution

The National Adjutant will distribute these guidelines annually to all departments.

GENERAL

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100% DISTRICT COMMANDER PIN

CERTIFICATION FORM

This recognition, in the form of a specially designed cap/lapel pin and certificate, is for any district commander (or similar county or parish commander) who accomplishes 100 percent of their assigned membership goal anytime during the membership year.

Department adjutants may nominate their district commanders by name at any time during the membership year and may use this form at any time to certify one or more winners. Pins and certificates will be shipped directly to the department for presentation at an appropriate ceremony.

Date _____

The Department of _____ requests 100% District Commander Pins for the following district commander(s) for meeting or exceeding assigned membership goals for membership year _____.

Commander	District	Number goal	Number attained

Department Adjutant Printed Name

Department Adjutant Signature

TO: **The American Legion**
Attn: Internal Affairs & Membership Division
PO Box 1055
Indianapolis, IN 46206
Fax: 317-630-1413
E-mail: membership@legion.org

Americanism Citation

Awarded to

For

Outstanding Service To Your Community

For

2025-2026

Presented by

**The American Legion
Americanism Commission**



Dan K. Wiley, National Commander
The American Legion



Mark Avis, Chairman
Americanism Commission

Certificate of Distinguished Service

Presented on behalf of the
Americanism Commission
To

*For having conducted the most outstanding department
Americanism program for the year 2025-2026.*

In Witness Whereof, There is affixed the signature of
the National Commander, National Adjutant, and
Americanism Chairman of The American Legion,
and countersigned by the Department Commander and Adjutant.

Department Commander


National Commander

Department Adjutant


National Adjutant

Date _____


Americanism Chairman

CERTIFICATE OF MERITORIOUS SERVICE

Awarded to

American Legion Post No.

of

The American Legion Department of

for

Performing outstanding service to community, state, and nation through efforts in conducting Americanism program activities for the year 2025-2026.

*Presented by the National Commander, duly attested by the National Adjutant,
and countersigned by Department Commander and Adjutant*

Countersigned:

Department Commander

Department Adjutant


National Commander


National Adjutant

COMMITTEE ON CHILDREN & YOUTH

NATIONAL ACHIEVEMENT AWARD

is issued to

for having attained

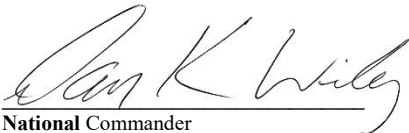
***100 PERCENT
POST CHILDREN & YOUTH
REPORTING***

in the

District

for the year

2025 – 2026


National Commander

Department Commander


Committee on Children & Youth Chairman

Department Children & Youth Chairman

COMMITTEE ON CHILDREN & YOUTH

ANNUAL
Children & Youth Citation
is issued to

for
OUTSTANDING ACHIEVEMENT
in the programs of
Children & Youth
for
2025 – 2026


National Commander

Department Commander


Committee on Children & Youth Chairman

Department Children & Youth Chairman

COMMITTEE ON CHILDREN & YOUTH

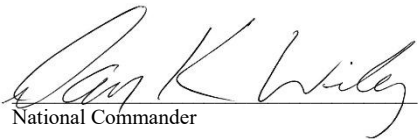
Certificate of
***MERITORIOUS
SERVICE***

CATEGORY

is issued to

for having conducted the
***MOST OUTSTANDING POST
CHILDREN & YOUTH PROGRAM***
as determined by the Department Children & Youth Committee

2025 –2026


National Commander

Department Commander


Committee on Children & Youth Chairman

Department Children & Youth Chairman

COMMITTEE ON CHILDREN & YOUTH

SPECIAL
Children & Youth Citation

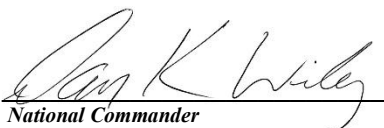
Category
is issued to

District

for
DEDICATED SERVICE
to our Nation's
CHILDREN & YOUTH

*Presented in recognition of outstanding service rendered to children,
as certified by an accurate and comprehensive report of activities for the year*

2025 – 2026



National Commander



Committee on Children & Youth Chairman

Department Commander

Department Children & Youth Chairman



Endorsement of Candidates for National Offices

Many departments wish to endorse candidates for national offices. To ensure the required information is received, the following endorsement procedure has been established.

A department resolution containing noteworthy information and a background check of the endorsed candidate may be submitted by department leadership via email to the executive assistant to the national adjutant at memery@legion.org. Materials should be submitted in PDF format.

Any endorsement resolution submitted through the regular resolution process will be forwarded to the executive assistant to the national adjutant for processing and will not be considered by the National Executive Committee or National Convention. They will be routed through the appropriate channels for consideration and will be added to the Prominent Legionnaire file for the member being endorsed.

RODNEY K. ROLLAND
National Adjutant



Correction of Continuous Membership

National makes every effort to maintain accurate records for continuous years for each member. If the number of years on the card is not correct, or missing altogether, the normal way of making the correction is to enter the right figure on the National/Department Record Cards at the time the post transmits the card to the department. The *Post Adjutant's Manual* contains complete instructions on processing cards.

There will be times a correction will need to be made after the National/Department Record Cards have been transmitted so that next year's membership card will be printed correctly. Departments and posts can update the member's record in Personify or the **Member Data Form (30-001)** can be forwarded to National Headquarters. Complete the form as instructed, including the member's name and ID number as they appear on the membership roster; a copy of this form is pictured elsewhere in this manual.

Calculation Example: If a member joined The American Legion in 2024, and has belonged continuously since joining, and if dues have been paid for 2027, the correct number of continuous years would be four (4).

Order your anticipated needs for this form when ordering bulk supplies for shipment in the spring.

Note: Some departments wish to retain control over the correction of records of continuous membership, and for these departments, National Headquarters will NOT accept a correction unless it is signed by an authorized department representative.

Unless instructed to the contrary, National Headquarters will accept any correction verified and submitted by the post adjutant.

DEPARTMENT REQUESTS FOR NATIONAL VICE COMMANDER

NATIONAL VICE COMMANDER _____

IMPORTANT: PLEASE INCLUDE ARRIVAL AND DEPARTURE DATES AS COMPONENTS OF THE ENTIRE VISIT. IT IS IMPORTANT TO INCLUDE THE ARRIVAL AND DEPARTURE DATES AS WELL AS THE PREFERRED AIRPORT TO ARRIVE/DEPART.

REQUEST 1-OFFICIAL VISIT

1ST CHOICE

Purpose of visit		
Arrival and Departure Dates	A:	D:
Place of Visit		
Airport Arrival		
Airport Departure if different than above		

2ND CHOICE

Purpose of visit		
Arrival and Departure Dates	A:	D:
Place of Visit		
Airport Arrival		
Airport Departure if different than above		

REQUEST 2-MEMBERSHIP VISIT

1ST CHOICE

Purpose of visit		
Arrival and Departure Dates	A:	D:
Place of Visit		
Airport Arrival		
Airport Departure if different than above		

2ND CHOICE

Purpose of visit		
Arrival and Departure Dates	A:	D:
Place of Visit		
Airport Arrival		
Airport Departure if different than above		

SIGNED BY DEPARTMENT ADJUTANT _____

DEPARTMENT OF _____



Information Technology (IT) Division

Department Support via Internet Access

A major goal of National Headquarters is to provide department staff with as much support as possible to help ensure the highest level of service to our members. The National Headquarters IT division has helped develop a secure internet site that provides access to National membership records for Legion and SAL members within their own department.

Access is given to the department adjutants and additional staff authority is at the discretion of the adjutant. However, we highly recommend that access be given to department staff members who perform the daily tasks of membership support.

Member information viewed on *PersonifyGO* (commonly called PGo) displays current data as shown on National's records. Administrative tools in PGo, include member management, transfer members, officer maintenance and numerous reports.

In addition to viewing member information, you can also submit membership dues electronically instead of mailing the paper transmittals. Departments can also verify the receipt and current status of each of their transmittals and take advantage of many other reporting or recruiting tools.

MyLegion.org provides the ability to remit dues payments. Department eports are generated through PGO.

Departments can access post information including addresses, current officers, and membership dues on file at National. In addition, you can view *Consolidated Post Reports* submitted electronically by your posts.

For further information, see **PersonifyGo Department Membership System** also in this manual. You can also email MyLegion@legion.org or call the Support Team at 833-253-9995.

The American Legion Dispatch

The American Legion Dispatch is a free twice monthly e-newsletter providing post, district and department officers, along with American Legion Family members, with news relevant to membership recruitment and retention, post activities and community support, American Legion programs, veterans benefits and more. The e-newsletter features headlines with clickable links to full stories on legion.org.

Subscribe at legion.org/newsletters. For questions, email dispatch@legion.org.



THE AMERICAN LEGION DISTRICT / COUNTY / ZONE IRS INCLUSION LETTER

Date _____

Format: mm/dd/yyyy (select date by clicking inside box)

The undersigned, a duly authorized officer of _____
(Legal Name of District / County / Zone)

District/County/Zone No. _____ Department of _____
(State)

does hereby authorize the National Organization of The American Legion to include it in its application to the Internal Revenue Service for a group exemption letter so that this District/County/Zone may be exempt from the payment of Federal Income Tax under the provisions of Section 501 (c) (19) of the Internal Revenue Code of 1954, as amended. The National Organization of The American Legion can remove the subordinate from the group exemption letter for not complying with the revenue procedure. **Please attach a copy of the e-mail or letter from the Internal Revenue Service indicating your assigned EIN#.**

EMPLOYER IDENTIFICATION NUMBER (EIN) _____

IMPORTANT INFORMATION

This form is not required on an annual basis and should only be submitted for the reasons below:

- (1) No IRS Inclusion Letter listed on myLegion (view under Attached Files)
- (2) Obtained new EIN Number due to becoming incorporated with your state Secretary of State's Office
- (3) Revoked, reinstated by IRS, needs tax-exempt status
- (4) New post that needs tax-exempt status

NOTE: If you just need a Tax Inclusion Letter, contact the Legal Office at Legal@legion.org

Complete the **required** fields below:

Officer Name _____

[Type First & Last Name to serve as digital signature]

Officer Title _____

Post Phone No. _____

Post Email Address _____

Post Mailing Address _____

City _____

State _____

Zip Code _____

Send forms to:

The American Legion
Attn: Legal Office
PO Box 1055
Indianapolis, IN 46206-1055
Email: Legal@legion.org

Revised: Feb / 2026



The American Legion Member Data Form

The Member Data Form (MDF) is used to report a variety of information regarding a member. For example, the form (No. 30-001) is used to report name or address changes, post transfers or deceased notifications.

Always clearly print the information in black or blue ink when completing the form. The Member ID number, post number and name of the department are required for an MDF to be processed by National Headquarters. The signature of the post adjutant is also required when reporting Honorary Life Membership, a deceased member, a post transfer, or a continuous years change.

The following pertains only to post transfers:

The transfer of membership from one post to another is a privilege granted to any paid-up Legionnaire with the approval of the post to which the member is requesting transfer.

TRANSFER GUIDELINES:

- 1) No transfer shall be made unless the member requesting transfer has a membership card showing the member is in good standing at the time the transfer is requested. Members whose dues for the current calendar year are not paid by February 1 of that year are suspended and are not in good standing, deeming them ineligible for transfer.
- 2) No charge shall be made to the member for the privilege of transfer and no dues shall be transferred from one post to another. The accepting post may require payment of the difference in dues on a pro-rated basis if dues are higher than the transferring member's former post.
- 3) A Legionnaire requesting transfer of membership must first secure approval from the post TO WHICH the transfer is requested; this may be approved verbally or in writing. The adjutant of the new post will complete and route the parts of the MDF as instructed.
- 4) National Headquarters will complete the process by transferring the member's record to the new post, provided the member's current record is on file and provided the transfer information on the MDF is complete.
- 5) Department LIFE members (not PUFL) should check with their department headquarters prior to requesting transfer.
- 6) Transfer forms must be completed for any DMS member requesting or approving transfer into a local post. No DMS member will be transferred into a department headquarters post except in the event that a member has physically moved from one department to another and specifically requests transfer into the new department's headquarters post.

Route the parts of the Member Data Form as follows:

Parts 1, 2 & 3 – Send to department headquarters. The department will either do the transfer or forward Part 1 to National, retain Part 2 for their files, and mail Part 3 to the member's former post.

Part 4 – The post should retain Part 4 for its own files.



MEMBERSHIP CANCELLATION MEMORANDUM

Information Sheet

Sometimes a department will find it necessary to cancel a membership. Usually this happens when a duplicate payment has been transmitted to National Headquarters for the same individual, for the **current** membership year in progress. When this situation is verified, National will cancel the most recent membership and will most often credit the department for the duplicate per capita payment. Membership cancellations will not be accepted for prior year memberships; deceased members will not be cancelled/credited and should simply be reported on a Member Data Form.

The Membership Cancellation Memorandum should be used to request cancellation of duplicate membership payments for the same individual for the current membership year. Members who join but are later found to be ineligible for membership should also be submitted on this form, however, credit may only be given if reported within 90 days of processing at National Headquarters. Traditional memberships are not refunded except in the two circumstances noted.

Complete the duplicate form and send the original to **The American Legion, Member Support Services, PO Box 1954, Indianapolis, IN 46206**. Retain the copy for your records. After receipt and verification, the membership will be cancelled or removed from the active files; any credit due to the department will appear on the next monthly statement issued by National's Finance Division.

Supplies of the Membership Cancellation Memorandum (Form 30-081 - 25 per package) should be requested from the Internal Affairs Division.



MEMBERSHIP CANCELLATION MEMORANDUM

MEMO TO: NATIONAL HEADQUARTERS DATE: _____

FROM: DEPARTMENT OF: _____

☐ Legion

☐ SAL

Please cancel the following membership record from the active file for the reason indicated below.

Member ID #:		Post/Sqdn #:	
Paid Year/Transmittal #:		Date Transmitted:	
Name:			
Street Address:			
City, State, Zip:			

- ☐ Traditional member - not eligible for membership.
- ☐ DMS - Not eligible for membership. *(If applicable, refund check will be issued to cancelled member.)*
- ☐ DMS – Already current member of local post. *(If applicable, a refund check will be issued to the cancelled member.)*
- ☐ Duplicate payment of dues for the same membership year. *(No credit will be given for prior years.)*
Original Card # _____ Paid on Transmittal # _____
- ☐ Other. Please explain: _____

.....

INSTRUCTIONS TO DEPARTMENTS

Credit will be given to departments only when duplicate payment of dues, and corresponding membership cards, are transmitted and processed at National Headquarters. Credit will appear on your next monthly statement from National's Finance Division. Do not use this form to report deceased members.

Complete all the information requested then print two copies. Keep one for department files and mail a copy to: The American Legion, Member Support Services, PO Box 1954, Indianapolis, IN, 46206. This completed form may also be emailed to MSSforms@legion.org.



MEMBERSHIP DEBITS AND CREDITS

Membership debits and credits occur when an adjustment is made to a department's membership total and will appear on its monthly statement from National's Finance Division.

The necessity of issuing a membership debit or credit occurs when:

- A membership previously transmitted has been cancelled and a Membership Cancellation Memorandum is submitted by the department to National Headquarters.
- The check accompanying a membership transmittal is not in the correct amount.
- The actual number of membership cards shipped and/or processed on a transmittal is greater or less than the number reported by the department on the transmittal form. (Often referred to as *overs and unders*.)
- Incomplete or illegible cards must be pulled from the transmittal.

Whenever it becomes necessary for National Headquarters to credit or debit a department's membership account, debits and/or credits will appear on the monthly statement issued to each department by National's Finance Division.

Traditional Membership Dues Transmittals

Departments are still able to submit membership transmittals via the mail-in process, instead of a digital transmittal through MyLegion.org. A two-part form is provided for departments who choose to mail their transmittals of dues and membership cards to National Headquarters. This form (No. 30-080) is used for both Legion and SAL membership, however, **do not include both on the same form.** (See sample form later in this section.)

- Complete the necessary information. Traditional transmittals are to be numbered, beginning with #1 for each membership year. It would be possible to have dues to send for several different membership years at the same time. **Prepare separate transmittal forms for each year.**
- If a transmittal is being submitted for a prior membership year, make sure you determine the last number used for that particular year and assign the next consecutive number to the transmittal.
- Do not exceed more than 5000 cards on a single transmittal.

If the department is using a computer-generated detail form, it isn't necessary to complete bottom portion of the transmittal form; simply complete the summary portion form and staple it to the computer-generated list.

The pink copy marked "Department" should be retained for Department records; the original marked "National" should **be sent with the cards and payment** to the address below; this should **ONLY** be used for membership transmittals.

The American Legion
IT/Scanner Operations
5745 Lee Road
Indianapolis, IN 46216

No cards will be processed without payment; cards and money should always be transmitted at the same time. If there is a shortage or overage in payment, the proper debit or credit will be shown on the next monthly statement issued to your Department by National Headquarters.

When necessary, a supply of transmittal forms can be ordered from: The American Legion, Internal Affairs Division, P.O. Box 1055, Indianapolis, Indiana 46206. You can also call 317-630-1330 or send an email to ia@legion.org.

Cards marked "duplicate," "unknown," or "deceased" should not be included in a transmittal. Please forward them with other member record changes to IT/Member Support Services, PO Box 1954, Indianapolis, Indiana 46206.

The scanner equipment does not read "**LIFE**" that is rubber-stamped on membership cards for Department Life Members. Although it's unlikely to occur at this point, if you need to code a record as Life, please submit the ID #, name, address and post number on a Member Data Form and make note of their Department Life status.

Please do not use staples, paper clips, "correction fluid" or self-sticking note paper on membership cards. These can take a considerable amount of time to remove all this material from the cards before a transmittal can be processed.

Although it's helpful for the cards to be sorted in Post order within the transmittal, please do not use rubber bands or paper clips to physically separate the Posts; that isn't necessary and delays processing.

If any boxes need to be marked with an "X" on National's portion of the membership card to indicate a change, make sure the "X" is only in the required box but not so large that it also touches any portion of the other boxes. The "X" needs to be neat and clearly indicate the box for the update required so that the correct change is made to the member's record.

THE AMERICAN LEGION MEMBERSHIP TRANSMITTAL FORM

To: National Headquarters – IT Scanner Operations

Date: _____

From: Department of _____

Dues Transmittal No.: _____ for Choose Year Membership Year

_____ Legion Members @ \$23.50 _____

_____ SAL Members @ \$5.00 _____

Department Adjutant Signature

NOTE: Please do not report both Legion and SAL on the same transmittal form

Post	Members	Post	Members	Post	Members	Post	Members

PAGE TOTAL: _____

TOTAL MEMBERSHIP PAID ON THIS TRANSMITTAL: _____

TOTAL MEMBERSHIP PREVIOUSLY PAID: _____

TOTAL MEMBERSHIP PAID TO DATE: _____

Include this form with corresponding membership cards and mail/ship to:

THE AMERICAN LEGION
ATTN: IT/SCANNER OPERATIONS
5745 LEE ROAD
INDIANAPOLIS, IN 46216



MYLEGION.ORG

Registration: MyLegion accounts are registered with the primary email address on the member record. Emails on multiple records are not recommended and will cause registration issues should both members attempt to create an account.

Member Information: MyLegion.org provides member information for members of The American Legion and Sons of The American Legion members. Members can manage profile information, print a current membership card, view member -only discounts, manage American Legion subscriptions, locate a service officer for assistance with claims, maintain renewal preferences and renew online.

Administrative Tools for Local Leadership: Adjutants and Commanders accessing MyLegion will have My Groups menu to manage post and squadron membership. My Groups provides the following features. Features vary based on group and permissions provided.

- View and edit membership information. District and county access have view only.
- Process membership online. Post, Squadron, Department and Detachment.
- Reports. Current Roster, Roster Updates, Members Renewed Online, Find HQ members.
- Labels. Thirty per sheet labels for post and squadrons.
- Renewal Letters and Labels. Create renewal letters and labels for LGN and SAL members.
- Transfer Invitation letter to members joining online.
- Global member search. Locate members that do not belong to your post/squadron.
- Group Information. A group is defined as a post, squadron, county, district, and detachment. Update and view group attributes and services, upload a group message to Resources > Find A Post, and update basic contact information. Address and dues rates cannot be updated through MyLegion. These updates must be reported using the *Post Data Report*.
- Online materials. Officer manuals, brochures, and speeches.

Online Membership Processing: Department, detachment, post and squadron membership processing is completed through MyLegion.org. Renew, transfer, and add new members through online membership processing. All transactions require payment. Membership transfers are processed on a *Member Data Form* sent to department HQ's.

HELP Resources: Find Help in MyLegion. Online help is located through "Find Help" to assist with MyLegion tools for members, My Groups administrative tools, and department and detachment. These resources include step by step instructions, presentations, and training videos.

Contact information: MyLegion@legion.org Phone: 833-253-9995

Paid-Up-For-Life (PUFL) Membership

Anyone who is currently an American Legion member or who is eligible for membership, and be in good standing, may become a PUFL member.

Lifetime membership can be paid either in one single lump sum or over 12 equal, monthly payments. Once a member fulfills the PUFL membership dues, he/she will be protected from any future dues increases at the post, department, or national levels.

All PUFL applications must be submitted to National Headquarters by one of three methods:



1. Online applications: Once the quote is received, the member can apply online. Once confirmed and payment is made, the member clicks "Submit" to complete the application process. **Note:** For those without internet access, the post or department can perform the process. A link to the PUFL application page has been added to **myLegion.org** for posts and departments.
2. Printed applications: Once the quote is received, the member can print an application to complete and mail to National Headquarters. The application will be pre-filled with the member's name, address, birth date, ID number and total cost of PUFL membership. (Incorrect member information can be updated on the application.) Mail the application and payment to National Headquarters at the address provided on the form. **Note:** For those without internet access, the application should be printed by the post or department and forwarded to the member for completion. A link to the PUFL application page has been added to **myLegion.org** for posts and departments.
3. Call Customer Support: Members can call toll free **1-800-433-3318** and speak directly to a customer support specialist. **Note:** This should not be considered the routine or primary procedure, as members, posts and departments have this ability.

The rate chart listed below applies to post dues of \$48.00 or less. If a post's annual dues are \$48.01 or higher, the post adjutant should contact Customer Support for the correct fee.

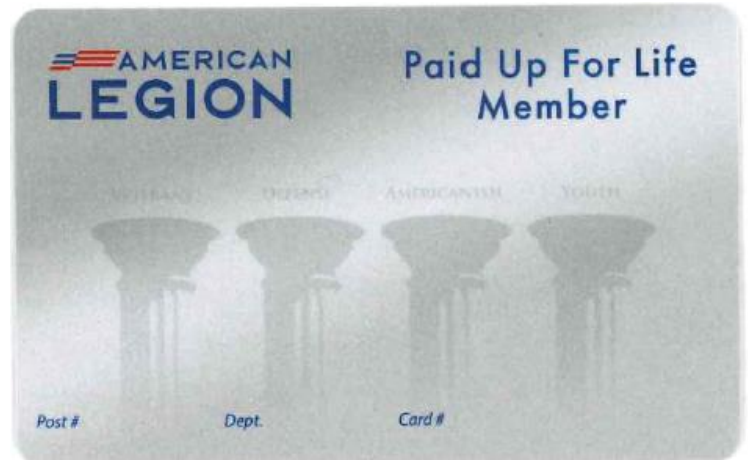
Paid Up for Life Pricing – Effective June 2016 (For post dues of \$48.00 or less)

AGE	18-29	30-39	40-49	50-59	60-69	70-79	80-89	90+
FEE	\$1,535	\$1,399	\$1,229	\$1,025	\$815	\$599	\$429	\$329

Effective June 1, 2016, all previous rate charts are superseded.

When paid in full, the member will receive a permanent plastic card identifying him/her as a lifetime member. The PUFL member will also continue to receive an annual American Legion membership card mailed directly on or about July 1st of each year. It is the member's responsibility to ensure that National always has their correct address on file; records that become undeliverable will result in suspension, followed by cancellation.

If a member chooses the monthly payment option and cancels or defaults, the member will not be eligible to participate in the monthly payment plan in the future.



However, the member may resubmit an application with full payment of the rate currently in effect at the time. **Any funds previously submitted on the cancelled account will not be credited to the new application.**

Once National Headquarters receives and processes an application, the member's post will be notified and allowed 30 days to challenge. Departments will be copied on the notification.

There will be no refund of dues already paid (time or full pay) if the member becomes deceased, if the member chooses to cancel his or her membership, discontinue participation in the monthly payment plan, or if National Headquarters must close an account due to delinquency.

All PUFL members can apply to transfer to a receiving post the same as any other member. Should a PUFL member hold membership in a post whose charter has been canceled, and is unable to transfer to another local post, the member will be transferred to their own department headquarters post.

Payment of Annual Dues to Posts and Departments

In July of each year, National Headquarters renews all PUFL members for the new membership year. After this massive renewal takes place, checks are issued to the departments, and, depending on the department, a post for reimbursement of annual dues for all PUFL members. All checks are sent to the respective departments for appropriate distribution. Although it's at the Department's discretion, it is suggested that posts be credited with their PUFL members when the reimbursement checks are received from National.

Per capita checks are accompanied by a detailed listing that include per capita reimbursement amount for each member. Departments will always receive the same portion of dues they received at the time of the application for the duration of the PUFL membership, assuming the member remains in that department. *(Note: In support of Resolution 6 approved May 2007 by the NEC at its annual spring meetings, departments will receive payment for their portion of the per capita in the amount that was in effect on May 9, 2007 for all PUFL memberships processed on May 9, 2007 and prior.)* If a PUFL member transfers into a new Post, whether in the same Department or a different one, the new Post (and Department, if applicable) will always receive the same portion of dues the member's previous Post (and Department) received.

a different one, the new Post (and Department, if applicable) will always receive the same portion of dues the member's previous Post (and Department) received.

Posts will always receive the same portion of dues that they received at the time of the application for the duration of the PUFL membership, assuming the member remains in that post. For example, Legionnaire Smith applies for a PUFL membership this year at Post X. The current dues are \$35, of which \$5 is kept by the post and \$30 is transmitted for the department and National portions. If Post X increases its Post per capita dues next year to \$10 (making total dues \$40), its reimbursement payment for Legionnaire Smith will remain at \$5. But if Legionnaire Jones purchases a PUFL membership next year, Post X will always receive dues reimbursement in the amount of \$10 for his membership.

Contact Customer Support at **1-800-433-3318** with questions or email PUFL@legion.org.



RESOLUTIONS

Based on the Rules of the National Executive Committee (NEC) of The American Legion, adopted by the NEC at its November 1940 meeting, the following regulations have been established for the procedure for NEC Resolutions:

1. Resolutions of Posts, intermediate bodies or other officially constituted subordinate organizations which shall have received favorable action by their respective department conventions or Department Executive Committee (DEC) and which shall have an appropriate endorsement thereof in resolution form shall be acted upon by the NEC.

2. In submitting resolutions, the following points should be carefully observed:

- a) Each resolution is to be prepared on separate official forms furnished for this purpose by the National Adjutant, The American Legion.
- b) Each resolution is to be prepared either
 - i) in quadruplicate (return original and two copies to National Adjutant, The American Legion, PO Box 1055, Indianapolis, IN 46206 – keep one copy for department records), or
 - ii) in computer file format, using the designated computer template, and sent via email to the National Adjutant with a copy to library@legion.org.
- c) Each resolution shall deal with only one subject – do not attempt to deal with more than one subject in the resolving clauses.
- d) Local resolving clauses may be used to specify the place and date the department convention or DEC meeting was held (it is not necessary to fill in the NEC meeting and dates in resolving clause).
- e) Each resolution is to be worded in full, including all **Whereas** clauses and the **Resolved** clauses.

THE AMERICAN LEGION NATIONAL HEADQUARTERS
INDIANAPOLIS, INDIANA

USE THIS FORM FOR RESOLUTIONS TO BE ACTED UPON BY THE NATIONAL EXECUTIVE COMMITTEE

Please fill out and email To: rrolland@legion.org with a cc: library@legion.org

RESOLUTION

SAMPLE

The above resolution was approved at

Department Executive Committee held at		on
Department Convention held at		on
	Department Adjutant's Name typed to the right	

NEW POST DEVELOPMENT PIN

CERTIFICATION FORM

This recognition, in the form of a specially designed cap/lapel pin, is for any individual who assists in starting a new American Legion post.

Department adjutants may nominate these individuals by name at any time once the temporary charter has been submitted.

Date: _____

The Department of _____ requests New Post Development Pins for the following individual(s) for assisting in the development of Post _____.

Name of individual(s) who assisted in starting this new post:

Department adjutant

Department

Pins will be shipped directly to the department for presentation at an appropriate ceremony.

TO: The American Legion
Attn: Internal Affairs & Membership Division
PO Box 1055
Indianapolis, IN 46206
Fax: 317-630-1413
E-mail: membership@legion.org

DUPLICATE THIS FORM AS NECESSARY



THE AMERICAN LEGION NATIONAL HEADQUARTERS

Notification of Post/Squadron Commanders & Adjutants

The post adjutant is to complete this form when all officers (who must be in good standing) for the upcoming membership year are known and will then forward the form to the department headquarters.

INSTRUCTIONS TO POST ADJUTANT

The post/squadron commander and adjutant notification form is to report the following to department and national headquarters.

- A. Your department, post number and date.
- B. The name, member ID number, phone number and email address of the post/squadron commander and adjutant for the impending membership year.
- C. Indicate the re-election/re-appointment of the incumbent or a newly elected or appointed officer by checking the appropriate box.
- D. If the post doesn't sponsor a SAL squadron, leave that section blank.
- E. Sign the bottom of the form in the space provided.

After completing the form, the post adjutant is to submit the form to the department headquarters. Keep a copy for the post's record.

SEE FORM ON NEXT PAGE

INSTRUCTIONS TO DEPARTMENT HEADQUARTERS

The department will retain a copy for their records and forward the original Notification Form to national headquarters by mail or email:

MAIL:

The American Legion
Member Support Services
5745 Lee Road
Indianapolis, IN 46216

EMAIL:

MSSforms@legion.org

The department should forward the forms to Member Support Services as quickly as the information is received from its posts. Please do not hold the forms. Refer to the department copy of the Notification Form to verify posts whose new officers have not yet been reported to national headquarters. These changes to post commanders and adjutants can also be made through the department MyLegion.org portal.

***NOTE:** If a post or squadron officer reported on this form is unable to complete his/her term, the post adjutant should report this information as soon as possible to the department headquarters and provide his/her replacement's name, ID number, phone number and email address. This should be reported in writing, preferably on post letterhead. The department will update their records and forward the notification to national headquarters. It's very important for the department and national headquarters to have current officer information at all times.*



THE AMERICAN LEGION NATIONAL HEADQUARTERS

Notification of Post/Squadron Commanders & Adjutants

Department of _____ Post No. _____ Date _____

POST COMMANDER

Member ID# _____ ☐ Incumbent ☐ Newly Elected/Appointed

Name _____

Phone _____ ☐ Cell ☐ Home ☐ Work

Email _____

POST ADJUTANT

Member ID# _____ ☐ Incumbent ☐ Newly Elected/Appointed

Name _____

Phone _____ ☐ Cell ☐ Home ☐ Work

Email _____

(Complete this section if post has an SAL squadron)

SQUADRON COMMANDER

Member ID# _____ ☐ Incumbent ☐ Newly Elected/Appointed

Name _____

Phone _____ ☐ Cell ☐ Home ☐ Work

Email _____

SQUADRON ADJUTANT

Member ID# _____ ☐ Incumbent ☐ Newly Elected/Appointed

Name _____

Phone _____ ☐ Cell ☐ Home ☐ Work

Email _____

SIGNATURE OF POST ADJUTANT

PERSONIFY: PGo

Department staff use Personify360 (PGo) as their primary membership system to view and manage TAL and SAL data and officers, generate reports, and other administrative tools. This platform should be restricted to the Adjutant and Commander, and Admin staff.

[Access to PGo requires an access request to NHQ IT staff.](#)

When access is granted, an email is sent with a username, and temporary password required to be updated on the first log in.

MYLEGION

MyLegion is a website for all members of The American Legion and Sons of The American Legion. The account is registered with the individual's primary email address.

A Department group becomes available in the Adjutants and Commanders MyLegion account once they are entered by NHQ staff. Reporting of Department Officers' information is in the department adjutant's manual.

Membership chairs and other dept officers can be assigned to a department/detachment group to their MyLegion account by department administrative staff using PGo. Permission settings allow view or read-only and can restrict online membership processing.

The department group will include:

- Member – View and Edit
- Online Membership Processing
- Global Member Search
- Member's Dues History
- Renewal Letters
- HQ Member Listing

Department Reports

Department-level reporting access can be set up one of two ways:

1) PGO access, which requires a separate set of login credentials and a new URL to access.

- This is best for Department staff and leaders who regularly update data, process membership, and who otherwise need the maximum level of access that we can provide.
- Power users, department staff, department Adjutant
- Requires request from Department to NHQ (MLACCESS@Legion.org)

2) Report-only access to Data Analyzer via MyLegion

- Does not require a separate login and does not require access to the PGO website.
- Cannot edit data, view-only access to department-level reports.
- This is best for department leaders who need to view data about the entire department but will not be regularly editing data, processing membership.
- Basic users
- Requires request from Department to NHQ (MLACCESS@Legion.org)

Add or Remove Access:

- Request through National IT division at MLAccess@legion.org. This email creates a ticket number and is assigned to IT staff to grant and remove permissions.
- Requests are to be made by the Department Adjutant or Acting Adjutant or copied in the email request.
- Include: staff name and email address

No action will be taken until correct officers have been entered into National's membership system. To report department officers complete form *019.012 Department Officers Certification Eligibility Form* available in the Department Adjutants Manual.

Monitor User Access using PGo and MyLegion Access User Reports

It is the department's responsibility to monitor access to PGo users. To see who has access to PGo generate a **PGo Access Department User** report from PGo Data Analyzer.

Detachments with PGo access will be included in this report.

Training Materials

Learn more about PGo using online help. Go to MyLegion.org staff login "Find Help" and go to "How to Use MyLegion." A section for PGo users will be available that includes help for department leadership.

THE AMERICAN LEGION PIONEER AWARD

Post Commander _____

Post Adjutant _____

The American Legion has authorized issuance of a citation titled *“The American Legion Pioneer Award.”* Your post may make nominations for this award immediately after securing a temporary charter.

This award is a way to recognize an individual who has made the greatest contribution in helping to get your post chartered and ensuring a successful operation.

You can play an important role in giving proper recognition both to the nominee and to your post. If your post would like to nominate someone, provide the information requested below and return this form to your department headquarters for certification and forwarding to National Headquarters.

Post No. _____ located at _____

Department of _____, was issued a temporary charter on _____, 20 _____

Name of Nominee(s) for The American Legion Pioneer Award is hereby made for:

_____	_____
_____	_____
_____	_____

(If more space is needed, post should attach a nominee(s) list)

The above information is certified as correct:

Department Adjutant Printed Name

Department Adjutant Signature

Date _____, 20 _____

DUPLICATE FORM AS NECESSARY

POST & DISTRICT REVITALIZATION RECOGNITION LETTER

CERTIFICATION FORM

These letters are awarded to the revitalized post and those individuals who assisted in the revitalization effort. Letters will be sent directly to the department for presentation at an appropriate ceremony.

Date _____

The Department of _____ requests a “welcome back” letter for Post _____.

Name of individual(s) who assisted in the revitalization of this post:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Department Adjutant

Department

TO: **The American Legion**
Attn: Internal Affairs & Membership Division
PO Box 1055
Indianapolis, IN 46206
Fax: 317-630-1413
E-mail: membership@legion.org

DUPLICATE THIS FORM AS NECESSARY



THE AMERICAN LEGION POST AND SQUADRON CHARTER FORMS ONLINE MEMO

American Legion Post and Squadron charter forms are available on the national website at:
www.legion.org/information-center/in-the-media/publications/organization-membership-awards

(Scroll towards the bottom of the page to the "Charter Forms" section)

Important: When downloading a form, first **save it to your computer** and then open the saved copy to enable the fillable text fields.

If you do not have Adobe Reader installed, you may download it for free by clicking the icon below

[**DOWNLOAD ADOBE READER**](#)

Post Temporary Charter Forms

- Temporary Charter Guidelines
- Temporary Charter Application
- Post Data Report (new post only) - required w/ charter application
- Authorization Form to Name Post (if applicable)

Post Permanent Charter Forms

- Permanent Charter Guidelines
- Permanent Charter Application

Post Charter Name and/or Charter Location Change Forms

- Charter Name and Location Change Guidelines
- Charter Name Change Form
- Charter Location Change Form

Post Supplemental Charter Forms

- Supplemental Charter Guidelines
- Understanding the Post Supplemental Application
- Supplemental Charter Application
- Post IRS Inclusion Letter
- District-County-Zone IRS Inclusion Letter

Sons of The American Legion (SAL) Charter Forms

- Squadron Charter Guidelines
- Squadron Charter Application
- SAL Squadron Data Report (new squadron only) - required w/ charter application

Post And Squadron Charter Cancellation / Merge Forms

- Post and Squadron Charter Cancel or Merge Guidelines
- Post Charter Cancel-Merge Form and Cancellation Checklist
- SAL Charter (squadron only) Cancel Form

Questions: Contact the Internal Affairs and Membership Division at (email) IA@legion.org.

Revised: APR / 2026



THE AMERICAN LEGION

POST IRS INCLUSION LETTER

Date _____
Format: mm/dd/yyyy (select date by clicking inside box)

The undersigned, a duly authorized officer of _____
(Legal Name of Post as listed on Charter)

Post No. _____ Department of _____
(State)

does hereby authorize the National Organization of The American Legion to include it in its application to the Internal Revenue Service for a group exemption letter so that this Post may be exempt from the payment of Federal Income Tax under the provisions of Section 501 (c) (19) of the Internal Revenue Code of 1954, as amended. The National Organization of The American Legion can remove the subordinate from the group exemption letter for not complying with the revenue procedure. **Please attach a copy of the e-mail or letter from the Internal Revenue Service indicating your assigned EIN#.**

EMPLOYER IDENTIFICATION NUMBER (EIN)

IMPORTANT INFORMATION

This form is not required on an annual basis and should only be submitted for the reasons below:

- (1) No IRS Inclusion Letter listed on myLegion (view under Attached Files)
- (2) Obtained new EIN Number due to becoming incorporated with your state Secretary of State's Office
- (3) Revoked, reinstated by IRS, needs tax-exempt status
- (4) New post that needs tax-exempt status

NOTE: If you just need a Tax Inclusion Letter, contact the Legal Office at Legal@legion.org

Complete the **required** fields below:

Officer Name
[Type First & Last Name to serve as digital signature]

Officer Title

Post Phone No. Post Email Address

Post Mailing Address

City State Zip Code

Send Forms to:

The American Legion
Attn: Legal Office
PO Box 1055
Indianapolis, IN 46206-1055
Email: Legal@legion.org

Revised: FEB / 2026



American Legion Death Notice

Please report the death of a prominent legionnaire to:

National Adjutant
The American Legion
PO Box 1055
Indianapolis, IN 46206-1055
Fax: (317) 630-1223
Email: TALforms@legion.org

Full name of the deceased:	
Membership number:	
Date of death:	
Age or date of birth:	
Member of American Legion Post No.:	
Department of:	
Continuous years of membership:	
Military service affiliation:	
Era (e.g. Korean War):	
Rank:	
Remaining survivors:	
Name and address for letters of condolence:	

RECONNECT CERTIFICATION FORM

A “Reconnect” is a DoD initiative meant to “reconnect” our country with its military. A reconnect effort is any face-to-face communication between military installations and American Legion posts, districts/counties or departments to showcase their many programs and services. Departments that do not currently report their reconnect efforts are strongly encouraged to do so. A minimum of 100 points will be awarded for each reconnect effort until June 30. Additional points may be awarded for more complex efforts lasting multiple days, involving other entities and demonstrating additional programs or services. A maximum of 5,000 points may be awarded to each department in a single membership year. Reconnect efforts dated July 1 or later will have those points applied towards the next year’s awards points totals.

Date _____

The Department of _____ certifies that the following (post/district/county) have participated in the following Reconnect event(s):

Department Adjutant

Department

TO: **The American Legion**
Attn: Internal Affairs & Membership Division
PO Box 1055
Indianapolis, IN 46206
Fax: 317-630-1413
E-mail: membership@legion.org



REPORT OF LIFE MEMBERSHIP AWARD

Information Sheet

- Purpose of Report: To submit the names of Legionnaires who have been awarded a Life Membership by their post for the purpose of recognizing the receipt of this honor by publishing their name in *The American Legion Magazine*, as space is available. The report follows on the next page and may be reproduced as needed.
- Deadline for Reporting: Anytime during the year.
- Mail to: Honorary Life Membership Notification
The American Legion Magazine
PO Box 1055
Indianapolis, IN 46206-1055
Email: magazine@legion.org

REPORT OF HONORARY LIFE MEMBERSHIP AWARD

Mail To: Honorary Life Membership Notification
 The American Legion Magazine
 PO Box 1055
 Indianapolis, IN 46206

I hereby report the following Honorary Life Membership award(s) for publication in *The American Legion Magazine*.
This report is submitted according to the following guidelines:

- Each Honorary Life Membership listed below was awarded by our post at absolutely no cost to the member. In each instance, the post has made provisions to pay the member's entire department and national dues for the remainder of their life (unless the member chooses to transfer to another post).
- Due to space limitations, *The American Legion Magazine* cannot publish the names of the members who have purchased their own Life Membership under the provision of National's Paid-Up-For-Life (PUFL) program or from a Life Membership program administered by a department; no such member's name is listed below. Only lifetime memberships purchased by the post and awarded to the member will be published.
- Reports of Honorary Life Memberships are accepted for publication only when certified by signature below of the current post commander, adjutant or finance officer.

PLEASE TYPE OR PRINT CLEARLY

Name of Post _____ Post # _____

Address _____

City _____

Member's Name	Year Awarded	Membership Card ID # (Required)
---------------	--------------	------------------------------------

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby certify that I have read the criteria regarding publication of Honorary Life Members and that the member(s) listed above is/are fully qualified.

Signature

Date

Office Held (Post Commander, Adjutant or Finance Officer)

(Reproduce this form as needed)

Request For A Limited Licensed Use Of The American Legion Name And/Or Emblem(s)

The name and emblems of The American Legion are registered service marks in the U.S. Trademark Office and protected by criminal and civil provisions of federal law (18 U.S.C.S 705 and 36 U.S.C.SS 21704 and 21705). Under authority of the National Executive Committee's May 2018 Resolution #1, the National Adjutant, or his designated representative (currently only the Director of American Legion Emblem Sales), may grant permission for a limited licensed use of the name and/or emblem(s) of The American Legion for use in accordance with the NEC's May 2018 Resolution #1 and U.S. Trademark Law.

To request this limited licensed use of the name and/or emblem(s) of The American Legion, please complete this form and forward it to your Department Headquarters' Department Adjutant. Your Department Adjutant will forward the completed form to The American Legion – Emblem Sales Division. Please note that the member, or Post, requesting the name and/or emblem(s) use must specifically define the intended use, identify the Post and quantity desired. The limited license, if granted, will only apply to the listed manufacturer.

Any name and/or emblem(s) limited license granted is given on a one-time use for the specific quantity listed. Any additional quantity over this number will require a new request as the manufacturer is strictly prohibited from producing more items than that being authorized. This limited license requires that all items are specifically manufactured as requested and HQ may request a sample item.

Please note that if this limited license request is for merchandise available through American Legion Emblem Sales your request will be denied. If the merchandise is not available through American Legion Emblem Sales, you may receive a limited license for the merchandise manufacture. Please note that if you are denied permission you may still be able to purchase merchandise directly from an approved American Legion licensee or their retail outlets. To view a list of currently approved American Legion licensees visit our website: <http://emblem.legion.org>.

Fill Out This Form Completely And Fax, Email or Mail To Your Department Headquarters

Purchaser Information

Post Number _____
Address _____
City _____ State _____ Zip _____
Contact Person _____
Member I.D.# _____
Telephone # _____ Evening # _____
Email _____
Product Description _____

Quantity _____
Price _____
Purpose/Use of item _____

Signature _____

Manufacturer Information

Name of Business _____
Address _____
City _____ State _____ Zip _____
Contact Person _____
Telephone # _____
E-mail _____
Product in all parts made in U.S.A.? - - - Yes _____ No _____
If not, please attach explanation.

Imprint instructions – Provide sketch or attach artwork.

DEPARTMENT USE

☐
☐

Recommend Approval
Recommend Denial

Department Adjutant

FOR OFFICE USE ONLY

☐ Approved
☐ Denied
☐ **SAMPLE REQUIRED TO BE SENT TO
AMERICAN LEGION NATIONAL HQ**

National Adjutant or Designated Rep. (A/L Emblem Director)

NATIONAL USE



Request to Omit Members from National Mailing of Renewal Notices

Upon the request of a post, members may be coded so that a dues notice will never be mailed to them. For example, this may be necessary for a member who resides in a health care facility and a family member ensures the dues are paid.

If posts wish to have members omitted from future dues mailings, National Headquarters urges that the request be submitted on the form shown on the following page. This form is **not** distributed by National Headquarters, but departments are free to reproduce and distribute to posts if they so desire.

Requests to omit members from mailings must be received at National Headquarters at least 30 days before intended receipt date for dues notices. Name, address, and member ID number are required for accurate identification of the member to be omitted.

Once a member's name has been coded to not receive direct membership renewal notices, official department notification is necessary to remove the code so the member will once again receive renewal notices.

The form entitled "REQUEST TO EXCLUDE MEMBERS FROM RENEWAL NOTICE MAILINGS" appears on the following page. Departments are free to copy and distribute to posts as preferred. Please note that Departments can also add or remove this code through PersonifyGo, using the Opt-in/Opt-out function.



American Legion Death Notice

Please report the death of a prominent legionnaire to:

National Adjutant
The American Legion
PO Box 1055
Indianapolis, IN 46206-1055
Fax: (317) 630-1223
Email: TALforms@legion.org

Full name of the deceased:	
Membership number:	
Date of death:	
Age or date of birth:	
Member of American Legion Post No.:	
Department of:	
Continuous years of membership:	
Military service affiliation:	
Era (e.g. Korean War):	
Rank:	
Remaining survivors:	
Name and address for letters of condolence:	



SONS OF THE AMERICAN LEGION ALL-TIME HIGH HONOR RIBBON REQUEST FORM

Pursuant to Resolution F3-85 - "All-Time High" Detachment Honor Ribbon (Red) will be awarded to a Sons of The American Legion detachment which has exceeded all previous years' membership.

** All-time high ribbons will be awarded at the National Convention by the SAL National Membership Committee. If a detachment representative cannot be located, the detachment should contact National Headquarters after convention has concluded (if applicable)

SAL Detachment membership for _____
Year (all-time high membership number)

Department Adjutant - signature

Type First & Last Name to serve as digital signature

Department

Date

Format: mm/dd/yyyy (select date by clicking inside above box)

NOTE: Report this form to National Headquarters when an "All-Time" for membership occurs for the applicable membership year. Please do not submit this form unless a new all-time high for membership has occurred.

Completed award forms can be submitted using one of the following methods:

The American Legion
Attn: SAL Awards
700 N. Pennsylvania Street
Indianapolis, IN 46204
Phone: 317-630-1205
Email: SALawards@legion.org
Deadline: N/A



SONS OF THE AMERICAN LEGION FIVE-STAR AWARD INFORMATION SHEET

Purpose: Post Adjutants certify winners, then submit Five-Star Order Form through the state American Legion Department headquarters office for final approval. The department should then submit the order form direct to Flag & Emblem Sales.

Basis of Award: Recipients must accomplish any or all of the following five points to receive individual star(s). Those who accomplish all five points are eligible to receive the 5- Star Award.

FIVE-STAR AWARD

This award is for all members of the Sons of The American Legion (SAL) who show perfection in the 5-Point Program of Service consists of the following:

- Point No. 1: A star for **Patriotism** to the member who shows a knowledge of the history of the Flag, the proper ways of displaying it, and the proper respect due it.
- Point No. 2: A star for **Citizenship** to the member who by his usefulness in activities outside the program of the SAL displays a working knowledge of the qualities of a good citizen.
- Point No. 3: A star for **Discipline** to the member who in all his activities shows respect for rules and obedience to them.
- Point No. 4: A star for **Leadership** to the member who develops the qualities of leadership in athletics, drill formations, and school and church activities.
- Point No. 5: A star for **Legionism** to the member who thoroughly understands the ritualistic work and the program of activities for the SAL.

Visit the Flag & Emblem Sales website at <https://emblem.legion.org/search?q=Five%20Star> to learn more.

**The American Legion
Flag & Emblem Sales
PO Box 1050
Indianapolis, IN 46206-1050
Phone: 888-453-4466
Email: EmblemSalesDivision@legion.org
Deadline: N/A**

REVISED: APR / 2026



SONS OF THE AMERICAN LEGION FIVE-STAR AWARD ORDER FORM

Department _____

Date _____

Format: mm/dd/yyyy (select date by clicking inside box)

Department Adjutant - signature

Type First and Last Name to serve as digital signature

SAL FIVE-STAR AWARD ORDER FORM

This is to certify that _____, member of
Squadron No. _____ Detachment of _____, City
of _____, has successfully completed his test on:

(Check all applicable boxes below)



1. Patriotism ☐



2. Citizenship ☐



3. Discipline ☐



4. Leadership ☐



5. Legionism ☐



Has passed all of the above 5-Star Award tests
and is entitled to have the Five Star Award Medal

Post Adjutant - signature

Type First and Last Name to serve as digital signature

Date _____

Format: mm/dd/yyyy (select date by clicking inside box)



VA&R CERTIFICATION FORMS DEPARTMENT VAVS REPRESENTATIVE/ ASSOCIATE REPRESENTATIVE **

Information Sheet

Each Department of Veterans Affairs medical facility has a Veterans Affairs Voluntary Service (VAVS) Committee made up of organizations whose members participate in the VAVS program for the benefit of veteran patients. Each organization may certify one representative and up to three deputy representatives to serve on this committee.

(**To develop and coordinate volunteer services from adjoining states, one associate representative and one deputy associate representative from each concerned state, may be certified to the VAVS Committee for out-of-state members participating in a medical center VAVS program.)

The actual certification of a representative to the director of the VA medical facility is done by the National Certifying Official, the Director of the Veterans Affairs & Rehabilitation (VA&R) Commission. The VA&R Director, however, relies on department officials to recommend an effective local leader for this important committee assignment.

The caliber of participation in the VAVS program is often directly related to the caliber of the leadership provided by the VAVS representatives. Therefore, too much emphasis cannot be placed on the proper selection of these individuals.

Qualifications for a VAVS representative are outlined in the VA pamphlet, *Guidelines for VAVS Representatives and Deputy Representatives*.

Enclosed are the forms to request the certification of individuals.



The American Legion
RECOMMENDATION FOR CERTIFICATION OF
DEPARTMENT VAVS REPRESENTATIVE, DEPUTY REPRESENTATIVE,
ASSOCIATE REPRESENTATIVE, AND DEPUTY ASSOCIATE REPRESENTATIVE

Date: _____

Dear National VAVS Representative:

We are recommending to you our Department VAVS Representative, Deputy Representative, Associate Representative and Associate Deputy Representative:

☐

VAVS Representative

☐

*VAVS Associate Representative

☐

VAVS Deputy Representative

☐

*VAVS Deputy Associate Representative

This appointment is:

☐

New

☐

A Re-certification

☐

A Replacement

Medical Facility:	
Address of Medical Facility:	
Name of Recommended Representative:	
Mailing Address:	
Email Address:	
Telephone Number:	
Length of Appointment:	Indefinite
Legion ID #:	Post #:

**Note: Designation only for individuals from an adjacent state to the facility.*

(If this appointment replaces an existing Representative or Associate Representative, please provide the following information about the replaced representative.)

Name:	
Mailing Address:	
Legion ID #:	Post #:

*ADJACENT DEPARTMENT ADJUTANT CONCURRENCE

Signature

**Note: Concurrence of an Adjacent Department Adjutant is only required when an Associate or Deputy Associate Representative is appointed to serve at a VA Medical Center from an adjacent state*

DEPARTMENT OF _____ DEPARTMENT OFFICIAL

Signature

Mail to:

Director, VA&R Division
The American Legion
1608 K Street, NW
Washington, DC 20006

Inquiries to:

Deputy National Representative
Phone: (202) 861-2700 Ext: 2994
Email: va&rdivision@legion.org

Loan Request Form for Ceremonial Rifles and/or Ammunition from the Department of Defense

Information Sheet

Purpose: For Post use to request loan of Ceremonial Rifles and/or Ammunition and for the Department to certify that the post is chartered and in good standing with required secure storage procedures.

The department and the Washington office may only handle requests from chartered American Legion posts in good standing that have accountability and storage procedures for firearms and munitions which are in accordance with local and state laws. Posts will make requests through their department headquarters. The post must attach the form to post letterhead stationery with the post commander's or adjutant's signature. This should be sent to department headquarters for submission to the Washington office.

Departments must verify the eligibility of the post and validate current weapons and munitions accountability and storage procedures. Once verification by the department is complete, the request is forwarded to the Washington office, which forwards it to the appropriate agencies for processing. When requests are made to congressional offices or other military departments without proper verification and endorsement, the acquisition process slows. Separate letters must be sent for each type of equipment requested. If both rifles and ammunition are needed, separate requests should be forwarded to the department and then to the Washington office, as two different government agencies – the Joint Munitions Command in Rock Island, Ill., and U.S. Army TACOM (Life Cycle Management Command) in Warren, Mich. – will be handling the request for items.

Mail to: **The American Legion**
 National Security Division
 1608 K Street NW
 Washington, DC 20006
 Email: NS@legion.org
 Phone: 202-861-2700

REQUEST FOR CEREMONIAL RIFLE(S), AMMUNITION OR EQUIPMENT

In order to request ceremonial Post rifle(s), ammunition or surplus military equipment complete this form and forward to your Department Headquarters, Attn: Department Adjutant. Your Department Headquarters will forward the completed and approved form to the National Security Division Director at the Washington DC American Legion office. Please note that only a Post Commander or Post Adjutant may request ceremonial rifle(s), ammunition or surplus military equipment.

Any request granted will be granted on a one-time basis for a given quantity. Additional orders will require a new authority and a new authorization. Request will be given with the caveat that all items requested will be used specifically for Post activities.

FILL OUT FORM COMPLETELY AND FAX OR MAIL TO YOUR DEPARTMENT HEADQUARTERS

Post Information

Post Number _____ Post Name _____

Address _____

City _____ State _____ Zip _____

Contact Person _____

Member ID# _____ Email _____

Telephone # _____ Evening # _____

Rifle/Equipment Requested _____
Quantity _____

Ammunition/Clips Requested _____
Quantity _____

Storage Procedures _____

Signature _____

Personal Shipping Information – NO POST OR P.O. BOX ADDRESSES

Name _____

Address _____

City _____ State _____ Zip _____

FOR OFFICE USE ONLY

<u>DEPARTMENT USE</u>	<u>NATIONAL USE</u>
☐ Recommend Approval ☐ Recommend Denial	☐ Approved ☐ Denied
_____ Department Adjutant Signature	_____ Director, National Security Division