Individual Award Nomination Form

Point of Contact: awards@ngaus.org

**Nomination Deadline:** May 15

Award Nominated to Receive: __________________________________________________________

Nominated By: ________________________________________________________________

Name/Rank/Duty/Title/ Organization or Unit of Assignment of Nominee:

______________________________________________________________________________

Years in the National Guard: ______________________________________________________

Justification for Award:

______________________________________________________________________________

______________________________________________________________________________

Proposed Citation:

______________________________________________________________________________

______________________________________________________________________________