

The White Clover Medal Award Form

The White Clover Medal Award was developed and approved a number of years ago. It is recognition for an AMVETS member who exemplifies service to veterans, most often service to our hospitalized veterans. There is not one specific set of criteria; in fact, various Departments have differing criteria such as to recognize a Post Service Officer or an individual who has performed some special task(s) in the line of service to hospitalized veterans but can be presented for other Veteran services such as home care needs.

NOMINATION FORM

NOMINEE: _____ **Phone #** _____

Street Address: _____

City: _____ **State:** _____ **Zip Code:** _____

MILITARY HISTORY: (Branch of Service, Dates, Years of service, Rank, Decorations, etc.)

MAJOR ACTIVITIES of NOMINEE: (Include Occupational Background, years as an AMVET Member, ect.)

JUSTIFICATION: (Major Actions or Achievements Can be in bullet form or narrative format, be specific (can attach write up))

Submitted By:

AMVETS Post: _____ Post Commander's Name _____

Date: _____ Post Commander's Signature: _____

OR

AMVETS MEMBER _____, Post _____

Signature: _____ Date _____

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Mail Nomination Form to:

AMVETS Department of Tennessee
ATTN: Honors & Awards Committee
PO BOX 349
Benton, TN 37307