



DISABLED AMERICAN VETERANS

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Awards Bulletin

DEPARTMENT OF VETERANS AFFAIRS EMPLOYEE

AWARDS BULLETIN

For 2012

Release date: November 10, 2011

**THE DAV NATIONAL COMMANDER'S AWARDS
RECOGNIZING AN OUTSTANDING MEMBER OF
THE DEPARTMENT OF VETERANS AFFAIRS
VETERANS HEALTH ADMINISTRATION (VHA),
VETERANS BENEFITS ADMINISTRATION (VBA) AND
NATIONAL CEMETERY ADMINISTRATION (NCA)**

The DAV is pleased to announce the National Commander's Awards Program to honor an outstanding individual within the Department of Veterans Affairs, Veterans Health Administration (VHA), Veterans Benefits Administration (VBA) and National Cemetery Administration (NCA) for 2012.

To successfully initiate these awards will require the support of all Departments and DAV National Service Offices in submitting deserving candidates from these categories. We strongly encourage a deserving candidate to be named and submitted from within each Department for possible selection and recognition by the Disabled American Veterans at the national convention.

Nominees for any of the four awards need not be a member of the DAV or veteran, but must be a Department of Veterans Affairs VHA, VBA or NCA employee. While a nomination for each administration is not required, nominations for each are encouraged.

To promote consistency among nominations, simplify the process and speed up submissions, a nomination form for each category is included. All nominations **must be submitted with the complete information and necessary photos no later than February 24, 2012.**

A set of rules follow this introduction. The rules outline procedures to be followed in making nominations for each individual in each administration. Please adhere to these rules for each nomination made.

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Your positive involvement in this program provides the Disabled American Veterans an opportunity to nationally and locally publicize individuals within the VHA, VBA and NCA who perform outstanding work on behalf of disabled veterans and their families. It is also a way for the DAV to say thank you to these truly tremendous individuals.

We look forward to your nominations and ask that you direct any questions concerning the program to the undersigned.

A handwritten signature in black ink that reads "Garry J. Augustine". The signature is written in a cursive style with a large, prominent initial "G".

GARRY J. AUGUSTINE
National Service Director

GJA:ejh

**Rules Governing the Program for
The DAV National Commander's Awards
Recognizing an Outstanding Member of
The Department of Veterans Affairs
Veterans Health Administration (VHA),
Veterans Benefits Administration (VBA) and
National Cemetery Administration (NCA)
For 2012**

The following is a list of rules to be observed in the selection of the nominee for the National Commander's Award recognizing an outstanding member of the Department of Veterans Affairs Veterans Health Administration (VHA), Veterans Benefits Administration (VBA) and National Cemetery Administration (NCA). The following information **must be submitted separately for each nominee:**

- Name; work and home address; date and place of birth; home, work and fax phone number of each nominee.
- A resume of education and work activities, to include military service dates and branch, if applicable.
- If the nominee is a member of the DAV, please supply Chapter number, city and state where located. **Remember that nominees need not be members of the DAV or a veteran to be eligible for these awards.**
- All nominations must be submitted with the **full consent** of the nominee authorizing us to use the person's name, picture and story for publicity purposes. **Submit nominee's signed written consent.**
- Each nominee's application **must be accompanied by an 8" by 10" glossy photograph or as an electronic .jpg file on a recordable compact disk (CD-R) with a minimum resolution of 300 dpi** of the nominee suitable for publicity purposes.
- The name, title and telephone number of the immediate supervisor of each nominee.

Nominations:

- Nominations for an Outstanding Member of the Department of Veterans Affairs Veterans Health Administration (VHA), Veterans Benefits Administration (VBA) and National Cemetery Administration (NCA) must generally be made by a Department of the DAV from submissions made through the chapters. DAV National Service Offices nationwide may also submit nominations. Departments are also encouraged to consider nominations from individuals directly associated with or witness to the outstanding performance of a member of the VHA, VBA or NCA.

- In the event of multiple nominations, Departments are requested to submit only their winning nomination in each administration to the Executive Director of the DAV Washington Headquarters for consideration of the National Commander's Award to be presented at the National Convention. The National Amputation and National Blind Veterans Chapters may submit nominations for the national award directly to the National Service Director.

Selection of recipient:

- The exemplary accomplishments of the nominee in relation to how his or her employment positively impacts on building better lives for America's disabled veterans and their families is considered;
- The ability of the nominee to willingly and effectively motivate others to positively serve the needs of disabled veterans and their families is factored;
- Public relations, writing, speaking and other proactive activities on behalf of disabled veterans and their families will also be weighed.

Administration:

The Department Adjutant should be responsible on the state level for implementing this program. DAV National Service Offices will submit nominations directly to the Executive Director, Washington, Headquarters.

Deadline:

Each nomination, with all supporting material, must be received by the Executive Director, Washington Headquarters no later than **February 24, 2012**. The selection of the national winner by the Awards Committee will be final.

The national winner will receive the award at the National Convention. **The only expenses to be paid by the National Organization are for providing the recipient with a round-trip airline ticket to Las Vegas, Nevada to receive the National Commander's Award. Hotel room and tax will be billed to the DAV master account for a maximum of two nights.** Subsequently, a voucher will be completed for reimbursement of per diem expense of \$75.00 for meals and incidentals for lodging each night.

Publicity:

Every Department is strongly encouraged to participate and urged to publicize this awards program for maximum participation. This is an effective way to recognize outstanding service by members of the VHA, VBA and NCA and encourage others to emulate their outstanding work on behalf of disabled veterans and their families.

Departments are requested to consider inviting representatives from the VHA, VBA or NCA in their respective areas to address members and to publicize these events. It is also suggested that the Department Convention would be an ideal opportunity to present a Department award to each VHA, VBA and NCA selected for consideration by the national award committee, and to invite local media and press to cover the award presentations.

The anticipated cooperation of all Departments is deeply appreciated. It will result in enhanced relations with members of the VHA, VBA and NCA and, ultimately, improved service delivery to disabled veterans and their families.

**National Commander's Award
Outstanding Department of Veterans Affairs
Veterans Health Administration (VHA) Member
2012
Department of**

(State)

Nominee's Name _____

Nominee's Home Address _____

Nominee's Work Address _____

Phone _____
(Home) (Work) (Fax)

Date and Place of Birth _____

Marital Status _____ Spouse's Name _____

Children _____

Military Service:

Date Enlisted _____, Drafted _____, Commissioned. _____

Date Separated _____, Branch _____, Rank _____

DAV Membership:

Chapter No. _____ City _____ State _____

Education:

Name of School _____ City _____ State _____

Degree _____

Name of School _____ City _____ State _____

Degree _____

Nominee's achievements:

Nominee's involvement with DAV and community groups:

1. **Include a copy of nominee's resume.**
2. **Include narrative of why nominee was selected.**
3. **Include an 8" by 10" glossy photograph or as an electronic .jpg file on a recordable compact disk (CD-R) with a minimum resolution of 300 dpi of the nominee suitable for publicity purposes.**
4. **Include signed nominee consent form.**

Submitted By:

(Name)

(Title)

(Street)

(City, State, Zip Code)

(Phone)

Approved By: *(Requires at least one signature)*

**National Commander's Award
Outstanding Department of Veterans Affairs
Veterans Health Administration (VHA) Member**

CONSENT FORM

I, _____ hereby authorize the Disabled American Veterans to use my name, photo and biographical information in connection with the National Commander's Awards Program.

(Signature)

(Date)

**National Commander's Award
Outstanding Department of Veterans Affairs
Veterans Benefits Administration (VBA)
2012
Department of**

(State)

Nominee's Name _____

Nominee's Home Address _____

Nominee's Work Address _____

Phone _____
(Home) (Work) (Fax)

Date and Place of Birth _____

Marital Status _____ Spouse's Name _____

Children _____

Military Service:

Date Enlisted _____, Drafted _____, Commissioned. _____

Date Separated _____, Branch _____, Rank _____

DAV Membership:

Chapter No. _____ City _____ State _____

Education:

Name of School _____ City _____ State _____

Degree _____

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Degree _____

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(Street)

(City, State, Zip Code)

(Phone)

Approved By: *(Requires at least one signature)*

DAV NSO

or

Department Adjutant

**National Commander's Award
Outstanding Department of Veterans Affairs
Veterans Benefits Administration (VBA)**

CONSENT FORM

I, _____ hereby authorize the Disabled American Veterans to use my name, photo and biographical information in connection with the National Commander's Awards Program.

(Signature)

(Date)

**National Commander's Award
Outstanding Department of Veterans Affairs
National Cemetery Administration (NCA)
2012
Department of**

(State)

Nominee's Name _____

Nominee's Home Address _____

Nominee's Work Address _____

Phone _____
(Home) (Work) (Fax)

Date and Place of Birth _____

Marital Status _____ Spouse's Name _____

Children _____

Military Service:

Date Enlisted _____, Drafted _____, Commissioned. _____

Date Separated _____, Branch _____, Rank _____

DAV Membership:

Chapter No. _____ City _____ State _____

Education:

Name of School _____ City _____ State _____

Degree _____

Name of School _____ City _____ State _____

Degree _____

Nominee's achievements:

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Approved By: *(Requires at least one signature)*

DAV NSO

or

Department Adjutant

**National Commander's Award
Outstanding Department of Veterans Affairs
National Cemetery Administration (NCA)**

CONSENT FORM

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(Signature)

(Date)