



VETERAN OF THE MONTH NOMINATION FORM

Thank you for nominating a Veteran who honorably served to be considered as a South Carolina Department of Veterans' Affairs (SCDVA) **Veteran of the Month**. Submit this completed form along with 3-5 photos (at least one in uniform during service) to veteranoftheweek@scdva.sc.gov

If selected as a Veteran of the Month, honorees will then be entered in an internal selection process for **Veteran of the Year**. Details on the Veteran of the Year selection process can be found online at scdva.sc.gov. Please provide as much detailed information as possible.

PLEASE NOTE: **Veteran nominees must reside in South Carolina** to be considered for recognition. If selected for Veteran of the Month, the Veteran cannot be nominated again until the following calendar year. SCDVA will complete a due diligence review of all Veterans considered for Veteran of the Month and Veteran of the Year.

NOMINEE'S GENERAL INFORMATION

DATE OF NOMINATION:

NOMINEE'S NAME:

NOMINEE'S RANK UPON SEPARATION:

NOMINEE'S BRANCH OF SERVICE:

NOMINEE'S LENGTH OF SERVICE:

NOMINEE'S LOCATION OF RESIDENCY:

NOMINEE'S CONTRIBUTIONS

DIRECT VOLUNTEER SUPPORT TO VETERANS (Please provide specific details and include dates/years of support provided):

VOLUNTEER SUPPORT TO THE MILITARY (Please provide specific details and include dates/years of support provided):

VOLUNTEER SUPPORT TO THE COMMUNITY (Please provide specific details and include dates/years of support provided):

NOMINATOR'S INFORMATION (if you are self-nominating, please provide us with the contact information of two references below.)

NAME:

EMAIL ADDRESS:

PHONE NUMBER:

RELATION TO THE NOMINEE (this section cannot be blank):

IMPACT STATEMENT (Why do you believe this Veteran should be honored as Veteran of the month?):

CONTACT INFORMATION FOR ADDITIONAL REFERENCES: