

## CONNECTICUT STATE FIREFIGHTERS ASSOCIATION, INC.

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#### Hall of Fame Award Nomination Form

Name of Nominee:	
Home Address:	
Email address:	
Fire Company Affiliation:	No. of Years
Accomplishments (include ranks & positions):	
State Fire Service Positions Held:	
National Fire Service Positions & Titles:	
Special Awards (fire service & personal):	

### Hall of Fame Application (Page 2)

Is the nominee currently affiliated with the Explain:			
Career: Volunteer: What Count	ty is the nominee	es from?_	
Is the nominee living? YES NO If no, what y Nominee or living family address:	-		
Submitters name:	Title:		
Telephone:	Email:		
Submitter's mailing			
address:			
Signature of Submitter:			
Signature of the Chief of the Department:_			
Department Name:			
Date of Submission:			
NOMINATION SUBMISSIONS AND ATTACHN CONNECTICUT STATE FIREF		_	TY OF THE

All submissions will be held for three (3) years, if nominee is not selected in the first year submission. ALL nomination packets must be received no later than **November 1, 2020.** 

Mail nomination packet to: Connecticut State Fire Fighters Assoc.

Attn: Hall of Fame Committee

Po Box 9

Mansfield Center, CT 06250

Questions/Concern: Call 860-423-5799 or www.csfa.org

# CT STATE FIREFIGHTERS ASSOC. HALL OF FAME AWARD REQUIREMENTS

**Purpose:** To recognize a present or former member of an organized fire department who has served both his/her department, county and/or state association(s) above and beyond normal expectations over an extended period of time. They shall have demonstrated leadership and have shown themselves to a motivating force for the betterment of the fire service throughout Connecticut and the United States. These persons shall have contributed in a positive way to be enrichment of the fire service organizations' they represented. Recipients' name will be placed in a location of prominence as a remembrance of their efforts which have benefited and improved the fire service of the State.

**Eligibility:** Any fire person who has served in a fire department and whom has contributed to the betterment of the fire service on a local, county, state or national level.

**Nominations:** Only one nomination shall be submitted annually, be a recognized member of a fire department or a recognized fire service organization in the state of CT. The nomination shall include positions, deeds, accomplishments, awards of distinction, length of service and other related pertinent information. It shall also include efforts on behalf of other worthwhile community services and awards of distinction. Review of nominations will be made by the CSFA awards committee. *Note: awards as a result of brave actions will be given under a separate format administered by the CSFA*.

**Applications:** To be completed on CSFA application forms and received by the CSFA awards committee not later than November 1, 2019. The application must be signed by the active Chief of the department as well as the submitter. Those nominated by a state association shall be signed by the current President. All applications will be kept on file and reviewed in subsequent years.

**Awards:** To be made annually at the Hall of Fame awards dinner. A pin and plaque of accomplishment will be awarded to each recipient or their family in case of posthumous award.

**Goal:** To attract capable young persons to join the fire service. To encourage younger member of the fire service, both career and volunteer, to continue to provide leadership and experience beyond their normal firefighting years. To serve as a means of educating the public about the important and indispensable protection that the fire service provides for the citizens of CT and our nation.