

ACLC, Alberta Provincial Committee  
**Honours and Awards Nomination**

Originating Squadron \_\_\_\_\_ or  
 Organization (e.g. APC) \_\_\_\_\_  
 Deadline: **MARCH 31st.**



**Nominee**

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone:	Cell Phone:	(Squadron if applicable)	Email:
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**Nominator**

Name of Member or Committee \_\_\_\_\_

Address: \_\_\_\_\_

Phone:	Cell Phone:	Position:	Email:
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Award being requested (Please check one)

**League Members**

<input type="checkbox"/> APC Commendation	<input type="checkbox"/> APC Distinguished Service Medal	
<input type="checkbox"/> Honourary Life Membership	<input type="checkbox"/> 5 Year Volunteer Service Pin	<input type="checkbox"/> Certificate of Merit
<input type="checkbox"/> Volunteer Recognition Award	<input type="checkbox"/> Certificate of Appreciation	<input type="checkbox"/> Certificate of Honour

**Non-League Members**

<input type="checkbox"/> APC Commendation	<input type="checkbox"/> Officer Recognition Award	<input type="checkbox"/> Certificate of Recognition
<input type="checkbox"/> Sponsor Recognition Award		

**Cadets (Deadline June 30th)**

<input type="checkbox"/> APC Commendation	<input type="checkbox"/> Holly Jones Memorial PR Award
<input type="checkbox"/> Bob Barraclough Leadership Scholarship	<input type="checkbox"/> Alberta Aviation Council - AME/Avionics Award

*The Provincial Honours and Awards Committee reserves the right to recommend nominations for other awards.*

**FOR OFFICE USE**

AC for APC Commendation, DM for Provincial Distinguished Service Medal, CH for Certificate of Honour, CM for Certificate of Merit, CR for Certificate of Recognition,	CA for Certificate of Appreciation, VR for Volunteer Recognition Award, 5Y for Five Year Pin, OR for Officer Recognition Award, SR for Sponsor Recognition Award
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UNIT    AWARD    YEAR    NOMINEE NAME	e.g. 123_HA_VR_20XX_John_Doe
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**Qualifying Information about Nominee**

<b>Member</b>		
<input type="checkbox"/> ACL National <input type="checkbox"/> Provincial Committee <input type="checkbox"/> Sponsoring Committee		
<b>Squadron Staff or Volunteer</b>		
<input type="checkbox"/> CIC Officer <input type="checkbox"/> Volunteer <input type="checkbox"/> Parent Committee <input type="checkbox"/> Cadet <input type="checkbox"/> Sponsor		
Date of First Affiliation with Air Cadet League		
Offices or positions held in the Air Cadet Program:		
Honours, Awards or Certificates received:		
Substantiation for Award: attached documentation if necessary		
<b>Proposed Citation (50 - 100 words)</b>		
<b>Nominator</b>		
Name (Print)	Signature	Date (yyyy/mm/dd) / /
<b>Recommendation by Wing Director</b>		
Wing Director Name (print): _____		Signature _____ (yyyy/mm/dd)
Phone: _____	E-Mail _____	Date: ____/____/____

Submissions must be received in digital form (ideally one PDF file including nomination form and supporting documentation) no later than **March 31st** by the Alberta Provincial Committee Immediate Past Chair, [past.chairman@aircadetleague.ab.ca](mailto:past.chairman@aircadetleague.ab.ca).