

# "FIREFIGHTER OF THE YEAR" NOMINATION FORM

*(please return by July 15, 2014)*

Department:

Chief:

Nominee/s: *(please include full name and title)*

Chief's E-mail:

Nominee/s Contact Information:

## CATEGORY

Select One:

Emergency Response

Norman Knight Award for Excellence in Community Service

Select One:

Individual Award

Group Award

## INCIDENT

Date:

Time:

Description: *(Please include the following elements into your narrative: conditions of circumstances, weather, extent of personal risk, victim risk, assistance. Feel free to use additional sheets of paper as needed.)*

Chief of Department Signature \*

*\* You will be asked to appear before the Heroic Awards Committee to further support your nomination and will be notified as to the date and time by our Events Coordinator.*