

In the arena of human life the honors and rewards fall to those who show their good qualities in action.
 —Aristotle

Don't worry when you are not recognized, but strive to be worthy of recognition.
 —Abraham Lincoln



Awards Program

Utilize Our Awards Program

Awards are considered based upon the documentation submitted. The Award Committee reserves the right to make the final determination on what award is issued. If no documentation is submitted the nomination will be returned with the nomination fee.

MAIL TO: AWARDS COMMITTEE
 6350 Horizon Dr. • Titusville, FL 32780

SELF NOMINATIONS WILL NOT BE ACCEPTED. All Law Enforcement nominations must be accompanied by supportive documentation and a nomination fee. The nomination fee is based on the award package(s) you select below. Please allow up to 30 business days to process.

OFFICE USE ONLY

AWARD ISSUED _____ DATE _____

REVIEWED BY: _____

1. Check Award requested:

- | | | |
|-----------------------------------------------------------|-------------------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> Silver Star for Bravery | <input type="checkbox"/> Law Enforcement Purple Heart | <input type="checkbox"/> Life Saving Award |
| <input type="checkbox"/> Merit Award for Excellent Arrest | <input type="checkbox"/> General Commendation | <input type="checkbox"/> Honor Award for Public Service |
| <input type="checkbox"/> Criminal Investigation Award | <input type="checkbox"/> Distinguished Police Service Award | <input type="checkbox"/> Correctional Officers Award |
| <input type="checkbox"/> John Edgar Hoover Memorial Award | <input type="checkbox"/> Knights of Justice Award | <input type="checkbox"/> Civilian Medal of Appreciation |
| <input type="checkbox"/> K-9 Service* | <input type="checkbox"/> K-9 Memorial* | |

* Certificate only

2. Select Package:

- Standard Package (\$30)
 - Premium Package (\$45)
 - Silver Star Package (\$60)*
 - K-9 Service/Memorial (\$10)
- * Only Available for Silver Star Recipients

Please print or type

1. Name of Nominee _____ Rank _____

2. Address _____

3. City _____ State _____ Zip _____

5. Department _____

6. Name and address where award should be mailed:

Name _____

Address _____

City _____ State _____ Zip _____

7. Describe the circumstances that occurred which led to this nomination (Copy of police report and/or newspaper article required)

Sponsor Information

Rank _____ Name _____

Department _____ Address _____

City _____ State _____ Zip _____

Date _____ Telephone No. _____ Email _____

OATH: I certify that this nomination is true and correct. I understand that falsifying information invalidates any award issued. The processing fee has no bearing on the award granted and is made to cover the costs of the materials and shipping. Fee and documentation must accompany application.

Make check payable to APHF

Sponsor's Signature _____

Commanding Officer's Signature _____
 (Required for **ALL** law enforcement nominations)

METHOD OF PAYMENT		NO C.O.D.'S please	
<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Money Order	<input type="checkbox"/> Check
□ □ □ □	□ □ □ □ □ □	□ □ □ □ □ □	□ □ □ □ □ □
Security Code: _____			Exp. Date
Signature _____			□ □ / □ □

Return to: **Awards Committee**
American Police Hall of Fame

6350 Horizon Dr. • Titusville, FL 32780 • www.aphf.org

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