

**PIEDMONT NORTH CAROLINA FIREFIGHTER'S ASSOCIATION**

**Nomination for OFFICER OF THE YEAR Award**

Name of Department \_\_\_\_\_ County \_\_\_\_\_

Name of Nominee \_\_\_\_\_ Age \_\_\_\_\_

Number of Years in Fire Service \_\_\_\_\_

Position Held \_\_\_\_\_ Number of Years \_\_\_\_\_

Family Information \_\_\_\_\_

Education \_\_\_\_\_

Certifications \_\_\_\_\_

Special Achievements/Recognition \_\_\_\_\_

Civic/Community Organizations Candidate Belongs To/Participates With \_\_\_\_\_

Other Remarks \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date Submitted \_\_\_\_\_

Sponsor Signature \_\_\_\_\_ Department \_\_\_\_\_

Sponsor Contact Information \_\_\_\_\_

\_\_\_\_\_

Additional information, documents, letters, etc. may be submitted with this application. The person making the nomination must be a member of the department. The department making the submission must be a current member of the PNCFA. Only one nomination per department will be considered. Nominations must be returned to: