

# INDIANA MILITARY VETERANS HALL OF FAME NOMINATION PACKAGE

## CRITERIA AND GUIDELINES

### 1. General Criteria:

- a. Eligibility: The nominee must have either been born in Indiana, entered military service from Indiana, or lived in Indiana for a minimum of eight years. Additionally, he /she must have received an honorable discharge from U.S. Military Service, be of good character and have no felony convictions. Posthumous nominations are accepted.
- b. Non-Eligibility: To preclude conflict of interest or the appearance thereof, IMVHOF Board of Directors, members of IMVHOF Selection Committee (SC), are NOT eligible for consideration for selection to the IMVHOF until they have ceased service therewith.
- c. Letters that simply recommend the nominee for inclusion will not be considered. This Nomination Package **MUST** be completed and received by the DEADLINE – August 1.
- d. Multiple nominations for a single individual are discouraged.
- e. The Nomination Package must **NOT** exceed fifteen (15) pages on 8-1/2" x 11" single-sided paper. The package includes all required and optional documents. If the package exceeds fifteen (15) pages, **it will not be** considered by the "Selection Committee" (SC).

### 2. Nominations: The Indiana Military Veterans' Hall of Fame has established two categories of veterans for entry into the Hall of Fame:

- a. Category #1: For the military accomplishments of a veteran such as receiving the Medal of Honor or for significant achievements during their military service (see general guidelines in paragraph 3 below).
- b. Category #2: For those who have honorably served in the US Armed Forces, and contributed exceptionally to community, state, and/or nation. (See general guidelines in paragraph 4 below).

### 3. General Guidelines for Category #1:

- a. The nominee must have been awarded one or more of the following U.S. military medals:
  - i. Medal of Honor
  - ii. Distinguished Service Cross
  - iii. Navy Cross
  - iv. Air Force Cross
  - v. Silver Star
  - vi. Distinguished Flying Cross for Heroism
  - vii. Bronze Star Medal

- viii. Purple Heart
- ix. Any medal with "V" Device

b. Some photographs or documents listed below are required. The optional documents, if available, are recommended, but submitted at the discretion of the nominee or nominator.

- i. Nomination Form **(Required)**: Please be accurate and sign the form indicating your validation of the data.
- ii. One copy of a good quality photograph of the Nominee. The photograph will not be returned. **(Required)**
- iii. Narrative: Describe why you feel this individual should be considered for the Indiana Military Veterans Hall of Fame. **(Optional)**
- iv. Verification of veteran's status **(Required)**: If the veteran does not have a copy of his/her honorable discharge, he/she (or relatives) may request the Discharge Orders (DD Form 214, Report of Separation) or equivalent and their decorations (SF Form 180, Military Record Requests) by going to one of two websites  
[www.archives.gov/st-louis/military-personnel/](http://www.archives.gov/st-louis/military-personnel/) or  
[www.archives.gov/veterans/military-service-records/](http://www.archives.gov/veterans/military-service-records/)
- v. Summary of Achievements while on Active Duty: A simple chronology of the veteran's service achievements and any detail that is needed. **(Optional)**
- vi. Copy of Medal Certificates, Citations, and General Orders for Awards: **(Required)** Include any narratives of Awards (If available).

#### 4. General Guidelines for Category #2:

- a. The nominee must have worn the uniform of this Nation's Armed Forces, performed their military duties, received an honorable discharge, and then continued to contribute to community, state, and nation in an exemplary manner. These outstanding contributions may, for example, be in areas of professional, civic, veterans' advocacy, political or contributions over the life of the nominee.
- b. Some photographs or documents listed below are required. The optional documents, if available, are recommended, but submitted at the discretion of the nominee or nominator.
  - i. Nomination Form **(Required)**: Please be accurate and sign the form indicating your validation of the data.
  - ii. One copy of a good quality photograph of the Nominee. The photograph will not be returned. **(Required)**
  - iii. Narrative: Describe why you feel this individual should be considered for the Indiana Military Veterans Hall of Fame. **(Optional)**

- iv. Verification of veteran's status **(Required)**: If the veteran does not have a copy of his/her honorable discharge, he/she (or relatives) may request the Discharge Orders (DD Form 214, Report of Separation) or equivalent and their decorations (SF Form 180, Military Record Requests) by going to one of two websites [www.archives.gov/st-louis/military-personnel/](http://www.archives.gov/st-louis/military-personnel/) or [www.archives.gov/veterans/military-service-records/](http://www.archives.gov/veterans/military-service-records/)
- v. Summary of Education and Training Accomplishments: A simple chronology of education and training accomplishments. List or attach any significant achievements, recognitions, etc. **(Optional)**
- vi. Summary of the Veteran's Professional or Employment History: Please provide a simple chronology of professional and employment history. You may attach any significant awards, recognition, etc. that may be pertinent to this item. **(Required)**
- vii. Summary of Veteran's Advocacy Contributions: State the nominee's active involvement with veteran's service or support organizations. **(Required)**
- viii. Summary of Civic Activities, and Contributions: State the nominee's civic affiliations and contributions, e.g. Rotary, Kiwanis, schools, public service, fraternal, etc. **(Optional)**
- ix. List Awards, Honors, or Publications about the Nominee such as Military and Presidential Awards, Who's Who, Citizen of the Year, books, newspaper or magazine articles, etc. **(Optional)**
- x. Any supporting documentation or Letters of Recommendation: Letters should be from people not immediately related to the nominee. **(Optional)**

## 5. Mailing Instructions

- a. Mail completed package to:

Indiana Military Veterans Hall of Fame  
Attn: 2015 SC  
P.O. Box 269098  
Indianapolis, Indiana 46226

- b. Please **DO NOT** send original documents or photographs as nothing will be returned to the sender.
- c. Do not return the Criteria and Guidelines.

## 6. Selection Process for Categories 1 & 2

- a. IMVHOF's Board of Directors will appoint a "Selection Committee" (SC) in September of each year. The SC will be comprised of selected veterans from across the state. The SC may also include previously inducted members of the Hall of Fame.

- b. The SC, following the Criteria and Guidelines, will review all nomination packages, and compile a recommended list for the Board of Directors' final approval. Veterans who are approved for induction into the IMVHOF will be notified in September.

#### 7. Annual Induction Banquet

Each year, on or about Veteran's Day, November 11, the IMVHOF will hold a Banquet / Induction Ceremony. The time and place will be advertised on the IMVHOF web site. Please see our website for additional details.

**Any questions** - please contact the IMVHOF at [www.IMVHOF.com](http://www.IMVHOF.com) or leave a message at (317) 916-6164.

**THIS FORM MUST BE COMPLETED IN ITS ENTIRETY**

Nomination is for:

Category 1		Category 2
<div style="border: 1px solid black; height: 60px;"></div>		<div style="border: 1px solid black; height: 60px;"></div>

## Nominee's Information

Date of Application: \_\_\_\_\_

Full Name of Nominee:

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

Street	City	State	Zip

Home Telephone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

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

City/State of Birth: \_\_\_\_\_

Date of Birth:

Is Nominee Deceased?	Yes	No
----------------------	-----	----

Location and Years of Indiana Residency: (Example: New Palestine, 1960 – 1965; Noblesville, 1976 – 1970)

---

### Checklists for Nomination Packages

1. Category 1 Checklist. Arrange the completed items for the Nomination Package in the order shown below. Please initial only the items included in your Nomination Package.

<u>Initials</u>	<u>Item Description</u>	<u>Required</u>	<u>Optional</u>
_____	Completed 3-page Nomination Form	X	
_____	Photograph of the Nominee	X	
_____	Narrative Description as per the Guidelines		X
_____	Proof of Honorable Military Service (DD Form 214) or equivalent	X	
_____	Summary of Achievements while on Active Duty		X
_____	Copy of Medal Certificates, Citations & General Orders for Awards	X	

2. Category 2 Checklist. Arrange the completed items for the Nomination Package in the order shown below. Please initial only the items included in your Nomination Package.

<u>Initials</u>	<u>Item Description</u>	<u>Required</u>	<u>Optional</u>
_____	Completed 3-page Nomination Form	X	
_____	Photograph of the Nominee	X	
_____	Narrative Description as per the Guidelines		X
_____	Proof of Honorable Military Service (DD Form 214) or equivalent	X	
_____	Summary of Education and Training Accomplishments		X
_____	Summary of the Veteran's Professional or Employment History	X	
_____	Summary of Veteran's Advocacy Contributions	X	
_____	List Awards, Honors or Publications about the Nominee		X
_____	Letters of Recommendation		X

### Nominator's Information

*(Note: Please all of the requested information)*

Full Name of Nominator: \_\_\_\_\_

Home Address: \_\_\_\_\_  
Street City State Zip

Home Telephone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

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

If selected, will the nominee or his/her representative be present to accept the award?

Yes ☐

No ☐

**PLEASE NOTE:** Only the Nominator will be notified if this nominee is **NOT** selected.

### AFFIDAVIT AND AUTHORIZATION

I hereby affirm that the information contained in this Nomination Package is accurate to the best of my knowledge and understanding, and in conformance with the Nomination Criteria and Guidelines. I agree to provide information if requested by the Indiana Military Veteran's Hall of Fame. I acknowledge that all provided photographs and documents will not be returned.

Signature of Nominator (Required) \_\_\_\_\_

