



Ohio Fire Service Distinguished Service Award

Ohio Fire Service Hall of Fame Selection Committee
Ohio Department of Commerce
Division of State Fire Marshal
8895 East Main Street
Reynoldsburg OH 43068

Date _____

I wish to nominate _____ for the Distinguished Service Award.

(If retired) Date: _____ If selected, name as it would appear on plaque: _____

The nominee is living _____ deceased _____

Address (if living): _____

Nominee's daytime telephone number: _____ Years of Active Fire Service: _____

The nominee is or has been a member of the following organizations, holding the offices indicated:

ORGANIZATION

OFFICES HELD

(Use additional sheets if necessary.)

Special honors and awards received: _____

(Use additional sheets if necessary.)

Explain the significant contributions the nominee has made to the Ohio Fire Service:

(Use additional sheets if necessary.)

Describe personal traits of nominee which you think qualify him/her for the Ohio Fire Service Hall of Fame:

Person or organization making nomination: _____

Signed _____ Address _____ City _____ State _____ Zip _____

Nominator's daytime telephone number: _____

Please be certain to submit a head and shoulders photograph of the nominee approximately 2" x 1-1/2" in size.
Photocopy this page if additional forms are needed.