



OFFICIAL ENTRY FORM
2007 - NATIONAL VAVS LEADERSHIP AWARD
 For

AMVETS - AMVETS LADIES AUXILIARY
And Sons of AMVETS

VAVS REPRESENTATIVES AND DEPUTY REPRESENTATIVES

Name of Candidate: _____ VA Facility: _____

Affiliation: AMVETS _____ Representative _____
 AMVETS Ladies Auxiliary _____ Deputy Representative _____
 Sons of AMVETS _____

(You may select only (1) from each level of the organization.) This form may be copied.

1. Number of years the candidate has served in the VAVS program: _____
2. Number of years the candidate has served on the VAVS Advisory Committee: _____
3. How many VAVS Advisory Committee meetings were scheduled over the past two years? _____
 How many VAVS Advisory Committee meetings did the candidate attend? _____
 Percentage of meetings attended by candidate: _____

YES NO

- | | | |
|-----------------------------------------------------------------------------------------------------------------------------|-------|-------|
| 4. Was the Annual Joint Review completed as scheduled?
_____ In Person
_____ By Telephone
_____ By Mail | _____ | _____ |
| 5. Does the candidate have R. S. assignment(s) other than the Advisory Committee? | _____ | _____ |
| 6. Does the candidate participate in any social event activities? | _____ | _____ |
| 7. Does the candidate participate in the National Salute to Hospitalized Veterans activities? | _____ | _____ |
| 8. Does the candidate plan, coordinate and participate in "Because We Care" activities? | _____ | _____ |
| 9. Does the candidate utilize the AMVETS VAVS Matching Funds program (sponsored by the AMVETS National Service Foundation)? | _____ | _____ |
| 10. Is there a youth volunteer program at your facility? | _____ | _____ |
| 11. Was the candidate active in establishing or maintaining the youth volunteer program? | _____ | _____ |
| 12. Does the candidate take an active leadership role on the VAVS Advisory Committee? | _____ | _____ |

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13. Candidate's total accumulative R.S. hours up to April 1, 2007: _____
14. Candidate's accumulative R.S. hours from April 1, 2006 to April 1, 2007: _____
15. Number of AMVETS VAVS volunteers as of April 1, 2006: _____
16. Number of AMVETS VAVS volunteers as of April 1, 2007: _____
17. Number of hours accumulated by all AMVETS VAVS volunteers between April 1, 2005 and April 1, 2006: _____
18. Number of hours accumulated by all AMVETS (or AMVETS Auxiliary) volunteers between April 1, 2006 and April 1, 2007: _____
19. How many miles does the candidate travel from home to the medical center: _____

This entry is submitted by:

Signature of Chief of Voluntary Service

Facility/Station

Date

Typed/Printed name of VAVS Chief

Phone

Note: Please attach a copy of current **ANNUAL JOINT REVIEW** and return by 30 April 2007:

AMVETS National Headquarters
Attn: Programs Department
4647 Forbes Boulevard
Lanham, Maryland 20706-4380

Phone: 877-726-8387
Fax: 301-459-7924