



Defense Logistics Agency Hall of Fame *Nomination*

1. Nominee's Name: _____

2. Career Service in DLA (Provide the nominee's organization, position/title, and inclusive dates of service. If the nomination is justified on contributions in more than one position or assignment, list each.)

3. Nominee's Current Address: (If deceased, provide the data for surviving spouse or next of kin.)

Name: _____

Relationship to Nominee: _____

Current Address: _____

Area Code/Phone: _____

4. Supporting Documents: *Include:*

- Narrative not to exceed 2 pages describing the nominee's enduring contributions and proposed citation (one paragraph).
- Substantiating and support documents.
- Portrait-style photograph of the nominee.

5. Person Preparing/Submitting the Nomination:

Name: _____

Organization/Office Code: _____

Area Code/DSN Telephone: _____

6. Sponsoring Organization (optional):

Signature: _____

Title: _____

7. Submission Date: _____