



# NOMINATION FORM



## Nomination of a Service Member or Living Veteran who has been Touched by War for a Quilt of Valor®

Before completing this nomination form for a Quilt of Valor® (QOV), please read the following information carefully and review our Privacy Policy located on our website at [www.QOVF.org](http://www.QOVF.org).

In 2003 Catherine Roberts, the QOVF Founder, created the concepts that underpin the QOVF mission statement: to cover Service Members and living Veterans touched by war with comforting and healing Quilts of Valor. To further explain the concepts behind the mission statement and help you with nominating a Service Member or Veteran touched by war for a QOV, please review the below information.

### ***What does “touched by war” mean?***

Only Service Members or living Veterans of the Armed Forces know what touched by war means to them, if they have been touched by war or whether they wish to share their experiences. We honor their wishes and do not judge. Service Members and Veterans may be touched or affected by war in direct and indirect ways, sometimes with long-lasting impact. Here are examples meant to help you better understand the phrase touched by war. They are not all inclusive:

- Engaged in direct combat, no matter when or where, in declared or undeclared wars or conflicts;
- Serving while in harm's way providing support and supply to those engaged in battle, combat or preventing conflicts;
- Caring for the casualties, injured, and ill on the frontlines, in-theater, deployed or in hospitals and medical centers overseas or stateside;
- Providing casualty assistance to families of the fallen, escorting the fallen or remains and/or participating in honor guards;
- Being wounded or injured in training for combat or direct support of combat;
- Being there to listen, minister and support others struggling with the demons of being in a war zone.

### ***Who is eligible to be awarded a Quilt of Valor?***

Service Members and living Veterans that served in the Armed Forces. Members of the activated National Guard and activated or active duty-special work (ADSW) reservists are included. The Army National Guard and Air Force National Guard are components of the Army and Air Force respectively. Merchant Marines activated from 1941 to 1945.

Only Veterans with an Honorable, Medical or General Discharge status are eligible. QOVF does not award posthumously.

### ***Are Service Member's or Veteran's families or other family support personnel eligible for QOVs?***

No, they are not. QOVF awards quilts only to Service Members and living Veterans of the U.S. Armed Forces. QOVF acknowledges and appreciates the support of families. We also remember and honor those who have given their lives for our freedoms, but do not award QOVs posthumously.



**General Information**

- 1. To my knowledge, this recipient has been "touched by war" and a Quilt of Valor® would bring comfort and healing? [ ] Yes [ ] No
2. To my knowledge, this recipient has not previously been awarded a Quilt of Valor? [ ] Yes [ ] No
3. This award is not intended as a surprise, gift or a present for a birthday, anniversary, retirement or other celebration. [ ] I Agree
If unsure, you must verify the above information before submitting the nomination; see criteria on first page of form.
4. Relationship to Recipient? [ ] Self [ ] Family Member [ ] Friend
[ ] Other
Coordinator of Group Award. For Group Award Events: Please provide the required information on separate forms, a chart or spreadsheet for each recipient.

**Recipient Information all fields are required except county and nickname**

First Name:
Last Name:
[ ] Male [ ] Female Nickname:
Street Address:
Address Line 2:
City, ST, Zip
County (if known):
Email:
Phone Number:

Current Status: [ ] Active Duty [ ] Veteran Discharge Status: [ ] Honorable Conditions
Armed Forces Branch of Service (Army and Air Force include activated National Guard and Reservists)
[ ] Army [ ] Navy [ ] Air Force [ ] Marine Corps
[ ] Coast Guard [ ] Dover Mortuary (AFMAO) [ ] Merchant Marines (1941-1945)
Dates of Service (year to year):
Current or Discharge Rank:
E.g.: E1-E10, WO1-WO5, and O1-O10

Where did the service member or veteran serve? (Check all that apply)
Awards for nominees currently deployed will be planned upon their return.
[ ] World War II [ ] Korean Conflict
[ ] Vietnam War [ ] Persian Gulf War
[ ] Cold War [ ] Operation Enduring Freedom (OEF)
[ ] Operation Iraqi Freedom (OIF) [ ] Operation New Dawn (OND)
[ ] Gulf War/ Desert Shield/Desert Storm (ODS) [ ] Other Wars or conflicts

Please use the last page to provide information about locations of service (e.g., stateside, deployments, countries). Example: France, Germany, Korea, Vietnam, Panama, Beirut, Granada, Bosnia, Iraq, Afghanistan, Africa, Somalia, the Middle East, anti-terrorism operations and terrorism attacks against Armed Forces personnel. You may also provide comments about the nominee regarding unit or ship assignment, duties or responsibilities while serving, experiences, or other information that will help personalize and make the ceremony meaningful for the recipient.



**Contact Information of the Requester (required)**

**First Name:** \_\_\_\_\_

**Last Name:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Relationship to Recipient?**       Self                               Family Member       Friend

Other

Coordinator of Group Award. For Group Award Events: Please provide the required information on separate forms, a chart or spreadsheet for each recipient.

If you have coordinated this nomination with a local QOVF group or individual, please add the name of the group, the group number if known, or the name of the person you contacted:

**Group Name** \_\_\_\_\_ **Group Number:** \_\_\_\_\_

**Member Name** \_\_\_\_\_

**How did you hear about the Quilts of Valor Foundation?**

Family or friend

From and Veteran or Service Member

Awarded a Quilt of Valor

Attended an Award of a Quilt of Valor

Social Media *Facebook, Twitter, etc.*

News Story *TV, newspaper or magazine*

QOVF Website

QOVF Brochure

QOVF Booth

QOVF Certified Quilt Shop

Quilt Guild

Community Event *fair, festival, workplace*

I am a QOVF Member

I am a QOVF Volunteer

Another Veteran organization (e.g.: *American Legion, VFW, VVA, IAVA, MOPH, DAV*)

*I certify that I have read the QOVF Mission Statement, all of the information on the first page and affirm the information I provided is accurate.*

**Signature:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Email, mail or hand deliver to your Local QOVF Group Leader or Member that gave you this form.**

<b>Name:</b>	_____
<b>Group Address:</b>	_____
<b>Phone Number:</b>	_____
<b>Email:</b>	_____

**QOVF Member: If a specific group or individual will handle this nomination, or is making the quilt, please ensure to add this in the Additional Information section when you enter the request through the online submission.**



Please add service location, duties, medals/ribbons or any other information you would like to share to help make the award ceremony more personal for all involved.

Lined area for text input, consisting of approximately 20 horizontal lines.