CHAPLAIN OF THE YEAR AWARD

NOMINEE INFORMATION

Name of Nominator

Address

City, State, Zip

Phone

E-Mail Address

Name of Nominee

Sheriffs' Office of the Nominee

Title (Rank) of Nominee

Nominee's Address

Nominee's Phone

Nominee's Cell Phone

Nominee's E-Mail Address

AWARD APPLICATION

1. In 300 words or less, please summarize why you feel this nominee should be selected as the NSA Chaplain of the Year?

2. Please describe the meritorious activities and major accomplishments of the nominee.

3. Please provide the member number the nominee's Sheriff:
   Contact elyons@sheriffs.org if you need assistance with locating the number

SUBMISSION INSTRUCTIONS

To submit this nominee for consideration, please email the following items to jschmidt@sheriffs.org

1. This nomination form.

2. A copy of the nominee's resume.

3. A letter from the nominee's Sheriff endorsing the application on office letterhead.

4. Any additional documents to be considered.

Applications will be accepted until December 15, 2025 for 2026 award consideration.