NAME OF YOUTH First	Middle Initial	Last
Youth's date of birth / _	/ Age	
Date Submitte	ed by Unit #	Dept. of
<ul> <li>Good Deed Award – Youth seed should be present</li> <li>Youth Hero Award - Youth seed should be present</li> </ul>	should demonstrate leaders	ship role in community service, specific
Please attach news clippings of	or include website to ve	rify the deed being recognized.
UNIT CERTIFICATION (MUST		-
		Date Date
Units should send completed a		
DEPARTMENT SECRETARY	CERTIFICATION	·
Name		Date:
	omination to National H	eadquarters, 8945 N. Meridian S
Please ship to:		
Name	Address	
City	State	ZIP
Phone	Email	
Please use this form for all Vouth He	10 15 14 1	
contact National Headquarters at ch		nominations. For more information, ans.org or (317) 569-4500.
	ildren&youth@ALAforVetera	•