



NOMINATION PACKET

Beginning in 2015, 12 veterans have been recognized each year for having made a lasting impact on our community and those who call it home. These veterans continued their military value of selfless service long after hanging up the uniform. We honor them for helping to make Cochise County what it is today, with contributions ranging from campaigning for arts education in schools to creating ways to make healthcare more accessible.

Canyon Vista Medical Center and the Legacy Foundation of Southeast Arizona seek to recognize and honor these former or current residents of Cochise County who have worn the uniform of the nation's armed forces and have substantially contributed to their community. Nominees should have demonstrated their commitment to Cochise County through volunteering and community service. Awards will be based on the breadth, depth, and impact of the veteran's service to the community.

Nominations for this year's Veterans Wall are being accepted through August 1, 2024. Nomination forms are available online at <https://www.canyonvistamedicalcenter.com/veterans-wall> and at the Legacy Foundation office, 302-01 El Camino Real, or at the concierge desk, Canyon Vista Medical Center.

Military service must be verified by submission of a U.S. military service document such as a DD214, Certificate of Release or Discharge from Active Duty, or DD Form 363, Certificate of Retirement prior to announcement of selection.

Nominations may be submitted posthumously.

Nominations can be:

- Mailed to the Legacy Foundation, PO Box 1089, Sierra Vista, AZ 85636 or
- Delivered to the Legacy Foundation office located at 302-01 El Camino Real, Sierra Vista or
- Email Electronic nominations to info@lfsaz.org

Questions may be directed to info@lfsaz.org



Legacy Foundation of Southeast Arizona
PROMOTING POPULATION HEALTH AND COMMUNITY WELLNESS
THROUGHOUT SOUTHEAST ARIZONA

VETERANS WALL NOMINATION FORM

Canyon Vista Medical Center



Legacy Foundation of Southeast Arizona

Name of Nominee _____

Nominee's Home Address _____

Nominee's Home Phone Number _____

Nominee's Email _____

Nominee's Spouse or Partner _____

Nominator's Name _____

Nominator's Address _____

Nominator's Home Phone Number _____

Nominator's Email _____

Signature of Nominator _____ Date _____

SUMMARY OF COMMUNITY SERVICE, HONORS, & AWARDS (1000 WORDS)

To Include: Contributions that helped make the nominee's community a better place to live and work; areas such as public education, safety, transportation, infrastructure, volunteerism, professional organizations, cultural activities, health/wellness programs, youth welfare, and similar activities should be included. Community recognition of the nominee should also be mentioned.

SUMMARY OF NOMINEE'S MILITARY SERVICE

Date And Place Of Entry Into Active Duty _____

Date And Place Of Retirement Or Release From Active Duty _____

Highest Rank Held _____

Military Job Specialty _____

Duty Assignments _____

Military Education _____

Personal Awards And Decorations _____

Total Years Of Service _____

Significant Military Experiences _____