



United States Lifesaving Association

Awards & Special Presentations

Application Form

Proposed Recipient:

Name: _____

- Lifeguard
- Junior Lifeguard
 - USLA Member: Yes No
 - Years of Service: _____ or Years in JG Program: _____
 - Region: _____ Chapter: _____
 - Agency: _____
- Non-Lifeguard Occupation: _____
 - Has applicant received any formal rescue training? Yes No
 - If Yes, please describe briefly: _____

Address: _____
Street City State Zip Code

Date of Action: _____ / _____ / _____ / _____ Time: _____ AM PM
Day of Week Month Date Year

Category of Award: (refer to USLA Criteria in Policies & Procedures Section III-E)

- MEDAL OF VALOR** (Lifeguard Personnel Only)
- HEROIC ACT** (Lifeguards and Non-Lifeguards)
- NATIONAL LIFESAVING AWARD** (Lifesaving agencies or groups)
- MERITORIOUS ACT AWARD** (Lifeguards and Non-Lifeguards)
- AWARD OF MERIT** (Lifeguard Personnel Only)
- LETTER OF COMMENDATION** (Non-Lifeguards Only)
- NATIONAL AWARDS PROGRAM** (Lifesaving agencies or groups)

Award Categories:

- National Award for Commitment and Dedication to Public Safety*
- National Award for Distinguished Service in Training & Professional Development*
- National Award for Drowning Prevention Achievement*
- National Award for Emergency Response Preparedness*
- National Award for Open Water Safety Achievement*
- National Award for Professional Achievement*

Incident Description:

Briefly describe the scene of the incident and its environment: _____

Describe the peril of the person(s) rescued: _____

Describe the actions taken by the applicant: _____

****Please attach news clippings, photos, videos, report or other materials to aide in describing this incident****

<u>Submitted by:</u>		
Name: _____	Phone: (____) _____	
Region: _____	Chapter: _____	
Signature: _____	Date: _____	

<u>Action Taken by Regional Committee</u>		
<input type="checkbox"/> Approved for (category): _____		
<input type="checkbox"/> Rejected	Signature: _____	Date: _____

<u>Action Taken by National Committee</u>		
<input type="checkbox"/> Approved for (category): _____		
<input type="checkbox"/> Rejected	Signature: _____	Date: _____

Return to: **United States Lifesaving Association
Awards & Special Presentations Committee
P.O. Box 366
Huntington Beach, CA 92648**