

## **ERIE COUNTY LEGIONNAIRE OF THE YEAR GUIDELINES FOR 2022**

1. All candidates' resumes will be judged on attendance at Post meetings, Post functions, and hours spent working in and for the Post. Dedication, Leadership, Service to the Post, Fellow Veterans and the Community are important considerations.

A concise, complete resume should be prepared, as the judges must make their choice **strictly** on the **merit** of the resume. The Name, Gender, Post Name, and Post Number and Community of the candidate **MUST be omitted** from the resume. **ANY** activities or elected office above Post Commander must **NOT** appear on the resume.

**PLEASE CHECK FOR PRONOUNS. DO NOT USE PRONOUNS THAT IDENTIFY GENDER.**

**CANDIDATES HOLDING ELECTED OFFICES ON THE DEPARTMENT OR DISTRICT LEVEL ARE NOT ELIGIBLE WHILE STILL IN OFFICCE!**

**RESUMES THAT DO NOT CONFORM TO ABOVE RULES WILL NOT BE JUDGED**

**ONCE A LEGIONNAIRE IS SELECTED COUNTY "LEGIONNAIRE OF THE YEAR," SHE/HE CANNOT BE SUBMITTED AS A CANDIDATE AGAIN.**

2. Posts are to submit the resume of their candidate to Kathleen A. Garvey, Erie County Legionnaire of the Year Chairman along with a Legionnaire of the Year Cover Sheet ("Cover Sheet") that will identify the candidate, her/his address, her/his Post name, Post Number, and Cap Size. The Cover Sheet should be placed in a plain white sealed envelope and attached to the resume.
3. Mail the resume and cover letter to the address below. The resume and cover letter **must be received by April 10, 2022.**

KATHLEEN A. GARVEY  
5792 MAIN STREET  
WILLIAMSVILLE, NY 14221

4. The "Erie County Legionnaire of the Year" is **not** awarded posthumously except when death occurs after a candidate's name has been entered in the contest.
5. The winner will be announced at the Annual County Convention, June 2022.

Any questions contact Kathleen A. Garvey at 716-907-8984. During business hours: 716-635-5029.

## LEGIONNAIRE OF THE YEAR – COVER SHEET

Post Legionnaire of the Year Chairman must complete this form and mail it to County Legionnaire of the Year Chairman in a sealed envelope attached to your candidate's resume.

COUNTY COMMANDER: PLEASE MAKE COPIES OF THIS FORM AND DISTRIBUTE TO POSTS IN YOUR COUNTY

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/TOWN/ZIP: \_\_\_\_\_

POST NAME: \_\_\_\_\_ POST # \_\_\_\_\_

CAP SIZE \_\_\_\_\_

\_\_\_\_\_  
CHAIRMAN

ATTESTED: \_\_\_\_\_

COMMANDER

\_\_\_\_\_  
ADJUTANT