

# ARIZONA FIRE SERVICE HALL OF FAME NOMINATION FORM

*Sponsored by the Arizona State Fire Training Committee*

## INDIVIDUAL NOMINATED FOR THE ARIZONA FIRE SERVICE HALL OF FAME:

Name of Nominee \_\_\_\_\_

Department/Organization \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone (Main) \_\_\_\_\_ Phone (Other) \_\_\_\_\_

Email Address \_\_\_\_\_

### NOMINATION INSTRUCTIONS

Individuals may be nominated based on the following:

Years of service (10 years minimum), majority of professional service and contributions being in the State of Arizona, service on committees, state/national impact, educational impact, operational impact, and/or any other area that may be applicable as an individual's significant contribution to the fire service and/or community.

Nominees are not limited to uniformed members of the fire service nor a particular segment of the fire service (volunteer, career, union, non-union, wildland, municipal, EMS, suppression, doctors, legislators, leaders, etc.).

In the following areas that apply, please provide a **detailed** summary of the nominee's significant contribution(s). Complete as many areas that apply to the individual; It is not necessary that all areas of the application be completed.

***It is more important to provide a detailed summary of the nominee's significant contribution(s) by fully completing those areas that apply to the individual. The focus of the nomination should be on the overall impact on the Arizona Fire Service. Nominations must clearly indicate an impact beyond the nominee's organization and must also be beyond the normal job requirements of the nominee.***

***Nominations previously submitted, that have not been selected, may be resubmitted.***

**NOMINATIONS MUST BE SUBMITTED NO LATER THAN MAY 15th**

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**1. Years of Service (Minimum of 10 Years):** \_\_\_\_\_

**2. Service on Committees and/or Associations (if applicable)**

*(Impact of service through committees and associations toward long range betterment of the Arizona Fire Service and their communities).*

**3. State/National Impact (if applicable)**

*(Nomination must clearly indicate an impact beyond the nominee's organization. The focus on the Hall of Fame is to recognize those individuals who have significant impact on the Arizona Fire Service).*

**4. Educational Impact (if applicable)**

*(Nomination must clearly indicate an impact beyond the nominee's organization and beyond the normal job requirements of the nominee).*

Materials Authored or Published:

Programs Developed:

Instructing/Teaching/Training:

Standards Development:

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**5. Operational Impact (if applicable)**

*(Nomination must clearly indicate an impact beyond the nominee's organization).*

**6. Contribution to Community (if applicable)**

*(Nomination must clearly indicate an impact beyond the normal job requirements of the nominee).*

**7. Organizational Impact (if applicable)**

*(Nomination must clearly indicate an impact beyond the normal job requirements of the nominee).*

**8. Legislative Impact (if applicable)**

*(Nomination must clearly indicate an impact beyond the nominee's organization and toward long range betterment of the Arizona Fire Service and their communities).*

**9. Other**

*(Nomination must clearly indicate an impact beyond the nominee's organization, beyond the normal job requirements of the nominee, and toward long range betterment of the Arizona Fire Service and their communities).*

**PLEASE ATTACH ANY SUPPLEMENTAL INFORMATION OR SUPPORTING  
DOCUMENTATION TO THIS NOMINATION FORM**

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**NOMINATIONS MUST BE SUBMITTED NO LATER THAN MAY 15<sup>th</sup>**

**NOMINATION SUBMITTED BY:**

**Name of Nominator** \_\_\_\_\_

**Department/Organization** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**Phone (Main)** \_\_\_\_\_ **Phone (Other)** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Date Nomination Submitted** \_\_\_\_\_

**ADDITIONAL INFORMATION REFERENCES:**

**1. Name** \_\_\_\_\_

**Phone (Main)** \_\_\_\_\_ **Phone (Other)** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**2. Name** \_\_\_\_\_

**Phone (Main)** \_\_\_\_\_ **Phone (Other)** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**RETURN THE COMPLETED NOMINATION FORM NO LATER THAN MAY 15<sup>th</sup> TO:**

**HALL OF FAME NOMINATION**

C/o Arizona State Fire Training Committee

PO Box 132

Avondale AZ 85323

**OR**

Submit application by email to: [melina.joya@azcfse.org](mailto:melina.joya@azcfse.org)

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