



HONORARY COMMANDER NOMINATION FORM

FULL NAME:

SPOUSE NAME:

EMPLOYER:

JOB TITLE:

PHONE NUMBER:

EMAIL:

HOME ADDRESS:

DATE OF BIRTH:

WHY WOULD YOU LIKE TO BE AN HONORARY COMMANDER?

PREFERRED DAY OF THE WEEK AND TIME FOR EVENTS:

ARE YOU AN EMPLOYEE OF THE FEDERAL GOV?	YES	NO
ARE YOU A FEDERALLY ELECTED OR APPOINTED OFFICIAL?	YES	NO
ARE YOU AN ACTIVE MEMBER OF THE NATIONAL GUARD OR RESERVES?	YES	NO
HAVE YOU SERVED IN ANY BRANCH OF THE MILITARY?	YES	NO
ARE YOU A PAID EMPLOYEE OF ANY POLITICAL PARTY?	YES	NO
ARE YOU A DoD CONTRACTOR?	YES	NO
DO YOU HAVE FINANCIAL HOLDINGS WITH ANY DoD CONTRACTORS?	YES	NO
HAVE YOU PREVIOUSLY SERVED AS AN HONORARY COMMANDER?	YES	NO

IF SO, WHICH SQUADRON/GROUP WERE YOU ASSIGNED TO?

WHAT WOULD YOU LIKE TO EXPERIENCE AS AN HONORARY COMMANDER?

**IF YOU WERE INVITED TO SPEAK, WHAT TOPICS WOULD YOU BE INTERESTED IN SHARING?
CHOOSE ALL THAT APPLY:**

Professional Experiences

Resiliency Stories

Leadership Stories

OTHER:

PERSONAL BIOGRAPHY AND PHOTO

Both are required to be considered - please speak to your impact in the community:

PLEASE RETURN TO:
COMMUNITY ENGAGEMENT
20FW/PA
20fwpublicaffairs@us.af.mil / (803) 895-2019