Nomination of a Service Member or Living Veteran who has been Touched by War for a Quilt of Valor®

Nomination Form (Note: * means required information)

Before completing this nomination form for a Quilt of Valor® (QOV), please read the following information carefully and review our Privacy Policy on the Quilts of Valor® Foundation (QOVF) website.

In 2003 Catherine Roberts, the QOVF Founder, created the concepts that underpin the QOVF mission statement: To cover service members and veterans touched by war with comforting and healing Quilts of Valor.

To further explain the concepts behind the mission statement and help you with nominating service member or veteran “touched by war” for a QOV, please see the “Frequently Asked Questions” below.

What does “touched by war” mean?
Only Armed Forces service members or veterans know what “touched by war” means to them, whether they have been “touched by war,” and some may not wish to share their experiences. We honor their wishes and do not judge. Service members and veterans may be “touched by war” or affected by war in direct and indirect ways; sometimes with long-lasting impact.

Below are some examples; they are not all inclusive. These examples are meant to help you better understand the phrase “touched by war.”

Being “touched by war” means:
- Engaging in direct combat, no matter when or where, in declared or undeclared wars or conflicts
- Serving while in harm’s way delivering support, supplies, etc., to those engaged in preventing conflicts or engaged in battle or combat
- Caring for the casualties, injured, and ill service members or veterans on the frontlines, in-theater, deployed, or in hospitals and medical centers overseas or stateside
- Providing casualty assistance to families of the fallen, escorting the fallen or remains, and/or participating in honor guards
- Being wounded or injured in training for combat or direct support of combat
- Being there to listen, to minister, and to support others struggling with the demons of being in a war zone
- And more…

Who is eligible to be awarded a Quilt of Valor?
Active duty service members and living veterans of Armed Forces who served in the United States Army, Marines, Navy, Air Force, and Coast Guard during declared war, conflicts, police actions, peacekeeping missions, counter terrorism operations, and/or times of peace.
- Members of the activated National Guard and activated or active duty-special work (ADSW) reservists are included. The Army National Guard and Air Force National Guard are components of the Army and Air Force respectively. Merchant Marines activated from 1941 to 1945.
- Service during, but not limited to, WWII, Korea, Vietnam, the Cold War, Panama, Beirut, Granada, Bosnia, Desert Storm, Desert Shield, Iraq, Afghanistan, anti-terrorism operations, and terrorism attacks against Armed Forces personnel is included.
Only veterans with an Honorable, Medical or General Discharge status are eligible. QOVF does not award QOVs posthumously.

Are service member’s or veteran’s families or other family support personnel eligible for QOVs?
No, they are not. QOVF awards quilts only to service members and living veterans of the U.S. Armed Forces. QOVF acknowledges and appreciates the support of families. We also remember and honor those who have given their lives for our freedoms, but do not award QOVs posthumously. See the QOVF website for other options.
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To my knowledge, this recipient has been “touched by war” and a Quilt of Valor® would bring comfort and healing? [ ] Yes [ ] No

To my knowledge, this recipient has not previously been awarded a Quilt of Valor?* [ ] Yes [ ] No

This award is not intended as a “surprise” or a gift, or a present for a birthday, anniversary, retirement, or other celebration. [ ] I agree

If unsure, you must verify the above information before submitting the nomination. Please refer to criteria on page 1.

Relationship to Recipient*
[ ] Self [ ] Family Member [ ] Friend [ ] Other __________________________
[ ] Coordinator of Group Award  For Group Award Events: Please provide the required information on separate forms, a chart, or spreadsheet for each recipient.

Recipient Information (all fields are required except “County” and “Nickname”)

First Name: __________________________ Last Name: __________________________

Male [ ] Female [ ] Nickname/Other Names: __________________________

Street Address: _______________________________________________________

Address line 2: _______________________________________________________

City: __________________________ State: __________________________ Zip Code: __________________________

County (if known): ** ______________ ______________  **County information helps locate the QOVF volunteers nearest the recipient.

Email: __________________________ Phone: __________________________

Current Status: Active Duty [ ] Veteran [ ] Veteran Discharge Status: (only the following are eligible)

Honorable Conditions [ ]

Branch of U. S. Armed Forces:

Army (including activated Army National Guard/Reservists) [ ] Marine Corps [ ] Navy [ ]

Air Force [ ] (including activated Air Force National Guard/Reservists) Coast Guard [ ]

Air Force Mortuary Affairs Office (AFMAO), Dover Mortuary [ ] Merchant Marines (1941-1945) [ ]

Dates of Service: (year to year) __________________________

Rank at Discharge or Current Rank: For example: E1-E10, WO1-WO5, and O1-O10: ________

Where did the service member or veteran serve? (Check all that apply)

[ ] Gulf War including Desert Shield and Desert Storm (ODS) etc. (1990 – present)
[ ] Other Dates and Wars/Conflicts, etc. ____________________________________
Please provide information about locations of service (e.g., stateside, deployments, overseas duty and countries).* For example, France, Germany, Korea, Vietnam, Panama, Beirut, Granada, Bosnia, Iraq, Afghanistan, Africa, Somalia, the Middle East, anti-terrorism operations, and terrorism attacks against Armed Forces personnel, and other. You may also provide comments about the nominee regarding unit or ship assigned to, duties or responsibilities while serving, experiences, or other information that will help personalize and make the ceremony meaningful for the recipient, etc.

*** Awards for service members currently deployed will be planned upon their return.

Please continue on a blank sheet.

**Contact Information of the Requester:** (required)

**First Name:** ____________________________  **Last Name:** ____________________________  **Phone:** ____________________________

**Email:** ____________________________  **City:** ____________________________  **State:** ___________

**Relationship to Recipient:** Self [   ]  Family [   ]  Friend [   ]  Coordinator of a Group Award [   ]  Other [   ]

---If you have coordinated this nomination with a local QOVF group or individual, please add the name of the group, the group number, or the name of the person you contacted: ____________________________

How did you hear about the Quilts of Valor Foundation?

[   ] Family or friend  [   ] From a veteran
[   ] Being awarded a Quilt of Valor  [   ] Attended an award of a Quilt of Valor®
[   ] Social Media-Facebook, Twitter  [   ] News Story (TV or newspaper)
[   ] QOVF Website  [   ] QOVF Brochure
[   ] QOVF Booth  [   ] QOVF Certified Quilt Shop
[   ] Quilt Guild  [   ] I am a volunteer for QOVF
[   ] I am a QOVF member  [   ] Community Event (e.g., fair, festival, work place, etc.)
[   ] Another veteran organization, (e.g., American Legion VFW, VVA, IAVA, etc.)

I certify that I have read the QOVF mission statement, all the information on page 1, and affirm the information I provided is accurate.

**Printed Name:** ____________________________  **Signed:** ____________________________

**Mail or hand deliver this form to:**

Local QOVF Group Leader or Individual

**OR**

**Mail to:**

Quilts of Valor Foundation
Nomination for Service Member or Veteran for a Quilt of Valor
P.O. Box 191
Winterset, IA 50273

For QOVF Group Leaders/Individuals: If a specific group or individual will handle this nomination please make a note when entering the information into QOVF online tracking system.