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U.S. DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS
WASHINGTON, D.C. 20531

NOMINATION FOR YOUNG AMERICAN MEDAL FOR BRAVERY 1994

This form should be used only for recognition of acts of bravery taking place in the specified calendar year.

NAME OF NOMINEE:	SEX:
ADDRESS:	
TELEPHONE NUMBER *(including area code)*:	DATE OF BIRTH:
PLACE OF BIRTH:	CITIZENSHIP:

The Young American Medal for Bravery is awarded to those United States residents who, during a given calendar year, have exhibited exceptional courage, attended by extraordinary decision, presence of mind, and unusual swiftness of action, regardless of personal safety, in an effort to save or saving the life of any person or persons in actual imminent danger. No more than two such medals may be awarded each year. The individual must have been 18 years of age or younger at the time the act of bravery took place.

For a candidate to be eligible to receive the Young American Medal for Bravery, the completed nomination file must be sent to the Young American Medals Committee, U.S. Department of Justice, Office of Justice Programs, 633 Indiana Avenue, N.W., Room 408, Washington, D.C. 20531. Nominations must be signed by the governor of the state in which the act of bravery took place.

To be considered, the nomination file must include:

- A copy of this completed form,
- A certified birth certificate or other evidence of the date and place of birth of the nominee,
- Two or more statements by witnesses or individuals having personal knowledge of the facts surrounding the candidate's extraordinary endeavor,
- A biographical sketch of the candidate, and
- A detailed account of any public recognition the candidate has received for his or her endeavor. This includes recognition of awards from any state, local, religious, or other organizations as well as any press coverage of the event in which the candidate displayed exceptional courage.

NAME OF PARENT OR GUARDIAN:	
ADDRESS:	
TELEPHONE NUMBER *(including area code)*:	RELATIONSHIP:

I certify that the nomination file has been completed in accordance with the above directions and hereby nominate the above named individual to receive the Young American Medal for Bravery.

GOVERNOR'S SIGNATURE	DATE:

(continued on the reverse)

LIST THE NAMES, ADDRESSES, AND TELEPHONE NUMBERS OF INDIVIDUALS IN THE COMMUNITY WHO COULD BE CONTACTED REGARDING THE ACT FOR WHICH THE CANDIDATE IS BEING NOMINATED:

CITE ANY RECOGNITION THE CANDIDATE HAS RECEIVED FROM THE NEWS MEDIA, STATE AND LOCAL OFFICIALS, CIVIC, RELIGIOUS, OR ACADEMIC GROUPS, ETC. ATTACH CLIPPINGS, COPIES OF CITATIONS, OR OTHER EVIDENCE:

(continued on next page)

PROVIDE A DETAILED ACCOUNT OF THE ACT OF BRAVERY FOR WHICH THE NOMINATION IS BEING OFFERED, INCLUDE THE NAMES OF THOSE INDIVIDUALS WHO ASSISTED THE NOMINEE IN HIS OR HER ENDEAVOR IF APPLICABLE:

DATE OF EVENT *(including year)*:	TIME:

LOCATION:

Please check to be certain that all required information is enclosed.

Public reporting burden for this collection of information is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspects of this collection of information, including suggestions for reducing this burden, to the Young American Medals Committee, Office of Justice Programs, U.S. Department of Justice, 633 Indiana Avenue, N.W., Washington, D.C. 20531; and to Public Use Reports Project, 1121-0189, Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.