

American Legion Department of North Dakota Department Officer Candidate Profile Sheet

Name:			
Post Name:			
Post No.: Post Location: District:			
Position Sought:			
Cap Size:	_ Cap Style: Mer	ns / Womens / Fort Knox	
Shirt Size:	_ Shirt Style: M	ens / Womens	
How would you like you	r name printed or	your name badge?	
Contact Information:			
Home Phone:		Cell Phone:	
Work Phone:			
Mailing Address:			
Email Address:			
Personal Background:			
Spouse Name:		Children/Grandchildren:	
Occupation:			
Community Organ	izations/Involvem	nent:	
Military Background:			
Branch of Service:		Rank Held:	
Date Entered:		Separation Date:	
Awards and Honor	·s:		

Ameri	can Legion Background:
	Continuous Years: Life Member: Y / N / PUFL
	Other Posts you may have belonged to (if any) and period:
	Current and Prior Post Positions:
	Current and Prior District Positions:
	Current and Prior Department Appointments/Positions:
	Current and Prior National Appointments/Positions:
Other	Veteran Organizations:
Other	Information and Honors Received:
All De	epartment and District Officers must have a DD214 on file at the
	rtment Office.
Date (Completed: Signature:
Pleas	e mail to: ND American Legion, PO Box 5057, West Fargo, ND 58078