



**THE AUXILIARY COMMAND
NEW BRUNSWICK PROVINCIAL COMMAND
THE ROYAL CANADIAN LEGION**



**APPLICATION FOR AWARDS
IN RECOGNITION OF PAST SERVICE**

PLEASE READ HONOURS & AWARDS REGULATIONS BEFORE COMPLETING FORM

1) Command _____ 2) Date _____

3) Name & No. of Branch Auxiliary _____

4) Name of intended recipient _____

5) Honours & awards previously granted with dates _____

6) Recommended for _____
(Name of Award)

7) Level _____
(Command, Branch, District, Zone)

8) In recognition of past service as _____
(Show here office held)

9) From _____ 10) To _____
(Date office assumed) (Date office relinquished)

11) Quote here, or attach exact wording of the resolution as passed by the executive or General meeting of the Branch Auxiliary, including date of the meeting.

12) _____
Branch Auxiliary Secretary

13) Legion Branch Approval

Name Office Held

14) Recorded by Ladies Auxiliary Provincial Secretary

Name Date