



Civil Air Patrol Member Award Suggestion Form for CT Squadrons

Please use this form to recommend a valued CAP member for a "Member of the Year" award in a specific category and provide as much information as possible to support your request.

Your Name

Your Squadron

Your Rank

Your E-mail Address

Your Duty Position

**Your Telephone
Number**

Name of recommended Member

Recommended Members' Squadron

Duty Position of recommended Member

Recommended Members' Rank

Award you recommend the Member for

Date Requested

Why would you like to recommend the CAP Member for the Award?

Comments

Please e-mail this form and any attachments that support your request or show the suggested members' qualifications in PDF format to: awards@ctwg.cap.gov