

Prominent Legionnaire Biographical Information

Dear Legionnaire:

National Headquarters seeks for its permanent historical files accurate biographical information concerning members of The American Legion who have contributed to the success of the organization, especially those who have been at any time prominent in national and/or department activities.

The attached questionnaire is being sent to those whose names are on national and department records having filled certain official positions. Service to The American Legion is the sole reason for inclusion in the collection, but non-Legion activities should also be mentioned in filling out the questionnaire.

It is hoped that everything of interest in your military experience will also be noted, as well as your participation in the public life of your community, and in the work of The American Legion.

Sincerely,

DANIEL S. WHEELER National Adjutant

Attachment



The American Legion Prominent Legionnaire Biography

This information will be kept permanently in the historical archives of the National Library of The American Legion and used by national staff to meet a variety of needs. It will not be shared with anyone but American Legion officials for Legion business. Please type or print clearly.

PERSONAL INFORMATION		
Name (Last, First, Middle):		Membership Number:
Place and date of birth:	Occupation	•
	Cocupation	
If married, spouse's name:		
Names of Children:		
Names of Children.		
LEGION HISTORY		
Post Name and Number:	Post Location	on – City & State:
Year Joined:	Voore of Me	mborchin
	Years of Me	
War Era:	Branch of S	Service:
Legion Act		
(Please add additional p Post/District Offices Held	ages if necessa	ry) Year(s) Held
Department Offices Held		Year(s) Held
National Appointments (Include Commission/Committees)		Year(s) Held

Involvement in Special Post/Department/National Activities:

Why did you first join The American Legion?

Which of your Legion experiences has been the most memorable? Why?

PERSONAL INFORMATION Home Address:			
Business Address:			
Home Phone:	Business Phone	:	Cell Phone:
Preferred email:		Alternate email:	

Date:_____Signature: _____

Please attach a recent photograph and a copy of your DD214 and current resume or complete the accompanying "Additional Information" page.

Please return to library@legion.org or mail to:

The American Legion National Headquarters ATTN: Library PO Box 1055 Indianapolis, IN 46206-1055



Prominent Legionnaire Additional Information (Submit DD214 and Resume or complete this form)

MILITARY SERVICE RECORD (Include branch, years, and location)				
High School:	EDUCATION	Year of Graduation:		
High School:	Location (City & State):	fear of Graduation.		
College/University/Trade/Military:	Location (City & State):	Year of Graduation:		
BUS	INESS/PROFESSIONAL EXPER	IENCE		
	INESS/PROFESSIONAL EXPER Location (City & State):	IENCE Years:		
BUS Employer:	INESS/PROFESSIONAL EXPER Location (City & State):			
Employer:	Location (City & State):	Years:		
Employer:	Location (City & State):	Years:		
Employer:	Location (City & State):	Years:		
Employer:	Location (City & State):	Years:		
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