



COLUMBIA  
COUNTY

Sheriff's Office

608-742-4166 Ext. 3323  
E-MAIL: wesley.nash@co.columbia.wi.us

WEBSITE: www.co.columbia.wi.us

Columbia County Sheriff's Office  
ATTN: Wesley Austin-Nash  
P.O. Box 132  
Portage, WI 53901

## AWARD NOMINATION FORM

### **Nominee Information:**

Deputy/Citizen Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

### **Please consider this nominee for the following awards.**

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> Medal of Valor       | <input type="checkbox"/> Meritorious Conduct Medal | <input type="checkbox"/> Outstanding Service Award | <input type="checkbox"/> Blue Star Award       |
| <input type="checkbox"/> Lifesaving Award     | <input type="checkbox"/> Citizen Recognition Award | <input type="checkbox"/> Outstanding Support Award | <input type="checkbox"/> Problem-Solving Award |
| <input type="checkbox"/> Collaborative Effort | <input type="checkbox"/> Stork Award               |  |  |

### **State why this individual should be selected for an award(s).**

**Please attach any documents such as Word files, photos, or report documents that feature the nominee and support your belief that the individual deserves the award(s).**

***Incident Information:***

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Report Number ( if known): \_\_\_\_\_

Location: \_\_\_\_\_

**Describe the incident event(s):**

***Nomination Submitted By:***

Name: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

**E-mail submission is preferred otherwise mail to:**

Columbia County Sheriff's Office  
ATTN: Sergeant Wesley Austin-Nash  
P.O. Box 132  
Portage, WI 53901