

Montana State University Billings Police Department

Award Nomination Form

This form is to be used in association with Policy 1008.

This section is to be completed by the person making the nomination.

Incident

Related Agency and Case Number	Incident Date/Time	Submission Date/Time

Nominee

Submitted by

Last, First, MI	Last Name, First Name, MI
University Employment Status: ☐ SWORN ☐ NON-SWORN	Employee: ☐ YES ☐ NO
Signature:	

Brief Details of Incident

Award Recommended

☐ Medal of Honor	☐ Medal of Valor	☐ Medal of Merit
☐ Purple Heart Medal	☐ Distinguished Service Medal	☐ Meritorious Service Medal
☐ Life Saving Award	☐ POST Status	☐ Achievement/Appreciation Award
☐ Educational Award	☐ Specialty Assignment Ribbon	☐ Expert Firearms Ribbon

Awards Committee Findings

This section is to be completed by the Awards Committee Chairperson.

☐ Approved	☐ Denied	☐ Reduced
☐ Medal of Honor	☐ Medal of Valor Distinguished	☐ Medal of Merit
☐ Purple Heart	☐ Service Medal	☐ Meritorious Service Medal
☐ Life Saving Award	☐ POST Status	☐ Achievement/Appreciation Award
☐ Educational Award	☐ Specialty Assignment Ribbon	☐ Expert Firearms Ribbon
Awards Committee Chairperson's Name:	Signature:	Date:

Comments

Final Review

This section is to be completed by the Chief of Police.

Comments

Approved ☐ YES ☐ NO

Chief's Signature:

Date:

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Award Documentation Form

This form is to be used in support of the Nomination Form in association with Policy 1008.

Incident

Related Agency and Case Number	Incident Date/Time	Submission Date/Time

Nominee

Submitted by

Last, First, MI	Last Name, First Name, MI

Documentation - Incident Details

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Signature of Nominating Party

Date _____

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