



JEFFERSON COUNTY

FIREFIIGHTERS ASSOCIATION

151 RIVERVIEW PLAZA DRIVE

HERCULANEUM, MISSOURI 63048-1318

BUSINESS: 636 475-4447 – FAX: 636.475.6191

WWW.JEFFCOFIREENGINEERALLY.COM – E-MAIL: BILLH6300@HOTMAIL.COM

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SALINE VALLEY

AMBULANCE

BIG RIVER

JOACHIM PLATTIN

NORTH JEFFERSON COUNTY

ROCK TOWNSHIP

VALLE

2023 MERITORIOUS ACTION AWARD

This award is intended to recognize firefighter(s), EMS personnel, department(s) and district(s) whose performance in the line of duty was conducted solely in an attempt to save a life, regardless of the outcome of the actions. Nominees for this award should be recognized because they reflect vigilance and professionalism of emergency personnel in Jefferson County.

Nominations for this award must be submitted by an organization member with the recommendation of the individual's Chief, or his/her designee, and provided the Awards Committee finds no hard evidence that the individual(s) actions were conducted under generally accepted safety standards. Such standards include, but are not limited to:

1. Abstinence from the influence of alcohol or drugs.
2. The use of applicable protective equipment such as protective clothing, breathing apparatus, etc.
3. Adherence to accepted operating procedures, where these criteria are applicable at the time of the incident.

Unsafe acts associated with the incident that were not within the control of the nominee should not prevent the individual(s)/department(s) from receiving the award.

This award will not be awarded if suitable nominees are not submitted.

REQUIREMENTS

Department and nominee must be a member of the *Jefferson County Firefighters Association* for the year nominated and hold the position of firefighter, engineer, captain, or lieutenant.

DEADLINE

Nominations and substantiating paperwork must be received by August 31st.

ENTRY FORMS

If typed or written, the nominations must include the completed official form supplied by the *Jefferson County Firefighters Association*. All handwriting must be legible. (Copies are acceptable)

The committee reserves the right to screen all nominations and exclude those not meeting the criteria set forth by the Jefferson County Firefighter's Association and the Awards Committee

JEFFERSON COUNTY FIREFIGHTERS ASSOCIATION

COUNTY AWARDS NOMINATION FORM

NAME OF NOMINEE: _____ AWARD BEING NOMINATED FOR: _____

DEPARTMENT OF NOMINEE: _____

PERSON MAKING NOMINATION: _____ PHONE: () - _____

DEPARTMENT: _____ TITLE: _____

REASON(S) FOR NOMINATION:

Use the reverse side for additional comments or attach additional sheets.

Signature: _____ Date: / / _____

RETURN COMPLETED APPLICATION TO:
BILL HAGGARD
441 JEFFERSON STREET
HERCULANEUM, MO 63048-1318
FAX: (636) 475-6191