

PATRIOTS' PARK WALL OF HONOR GUIDELINES

DEFINITIONS

Patriot – one who loves, supports, and defends his or her country and its interests with devotion

Honor – good name or public esteem; keen sense of ethical conduct; an evidence or symbol of distinction

A Heroic Act – showing great bravery, or courage

PURPOSE: The purpose of the “Wall of Honor” within Patriots’ Park is to provide a lasting monument to residents of the Carmichael Recreation and Park District who gave their life for their Country or Community.

Candidates for the “Wall of Honor” within Patriots’ Park must meet all the following criteria:

- The individual gave their life for their Country or Community
- The individual was a resident of the CRPD or the town of Carmichael or worked or served the community of Carmichael
- The individual must not have been convicted of a felony

Nomination and timeline:

- The CRPD relies on the community for nomination
- Nominations must be made by May 31. Up to five (5) applicants per year may be approved. The act of courage can go back to 1945 (the inception of CRPD).
- Nomination may be submitted on the official nomination form or in a letter that contains all the pertinent information
- Review committee consisting of: Members of the public safety community (*i.e. Police Department or Fire Department*), the military community, the community at-large, or CRPD staff, will make recommendations to the Advisory Board for approval
- A public ceremony will be held yearly at Patriots’ Park to honor that year's honoree
- A registry with a brief “story” of each honoree of the “Wall of Honor” will be maintained on the District web site.

Carmichael Recreation and Park District
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(916) 485-5322 - (916) 485-0805 fax
www.carmichaelpark.com

**Carmichael Recreation and Park District
Application for Consideration of Naming to Wall of Honor**

*The purpose of the "Wall of Honor" within Patriots' Park
is to provide a lasting monument to heroes who gave their life for their Country or
Community.*

NAME: _____

DATE OF BIRTH: _____ DATE OF DEATH: _____

DETAILS OF THE HEROIC ACT:

RESIDENCY OF CRPD: _____ YEARS or RESIDENCY OF CARMICHAEL _____ YEARS
or YEARS WORKED IN CARMICHAEL AND FOR WHOM

In your own words, discuss your reasons/justification for making this nomination. Attach supporting documentation/information, such as but not limited to, photographs, newspaper articles, letters of commendation, obituaries, etc. CRPD will be depending solely upon the information and research you have supplied when considering nominations.

How nominee name should appear on plaque if approved _____

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Date: _____

Nominating Person or Group: _____

Address: _____

Phone #: _____ Signature: _____

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Nomination Received by (CRPD staff):

CRPD staff Signature

Date

CRPD Staff Review:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Review Committee Recommendation:	APPROVE	<input type="checkbox"/>	DECLINE	<input type="checkbox"/>
Advisory Board Action Date:	_____			
	APPROVE	<input type="checkbox"/>	DECLINE	<input type="checkbox"/>