



# Florida Sheriff's Explorer Association

## Patrick Walshe

### Community Service Award

**The Award:** In March 1998, this special award was created to recognize a Florida Sheriff's Explorer Association Explorer who has demonstrated superior performance as an Explorer. The recognition of the outstanding Explorer will be presented at the annual FSEA State Delegates Conference.

**Who is Eligible:** Any law enforcement explorer who has been a member of their respected FSEA post for a minimum of one (1) year prior to nomination may apply. Candidates will be evaluated according to their leadership ability, post activity involvement, work ethics and community service activities.

**Application Process:** The candidate should complete the application carefully and be sure to include these certifications:

- Post Nomination
- Letter of recommendation from the post advisor
- A 3x 5 black and white photograph of the candidate, in their respective post uniform. This will be used for publicity purposes in the event of selection.

**Selection Process:** The selection will be conducted by a panel of three (3) Florida Sheriff's Explorer Association Advisors consisting of: Two (2) FSEA advisors and one Senior Advisor from the Orange County Sheriff's Office.

**Deadline:** The completed application must be received in triplicate no later than the Advisor's spring delegates Business meeting of the year applied for. .

#### **Form Instructions:**

The Applicant should sign and date the application and submit it to the sponsoring post for their signature.

Attach the required documents and submit to the selection committee.

Application must be typed or printed in black ink.

**Part I  
Personal Data**

Nominee's Name \_\_\_\_\_

Address \_\_\_\_\_  
(Street or P.O. Box) (Apt.#)

\_\_\_\_\_  
(City) (State) (Zip)

Date of Birth \_\_\_\_\_ Age in March \_\_\_\_\_

Fathers Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

Guardian's Name \_\_\_\_\_

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**Part II  
Educational Data**

High School or College \_\_\_\_\_

School Address \_\_\_\_\_

If Still in high school indicate the school or college you plan to attend.

Name of school \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

What type of degree/certification do you plan to work toward? \_\_\_\_\_

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**Part III  
Qualifications**

1. Major field of interest in Exploring.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2. What previous experience in your Explorer Post have you had? (Give full details, including dates, location, work/functions, and project objectives:.**

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**3. List school and community organizations in which you are or have been active. (Indicate those with which you are currently active)**

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**4. List leadership positions you have held in your Explorer Post, clubs, or other organizations. (Indicate those positions you hold now.)**

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**5. List important awards or recognitions you have received, the organization that presented them and the year received. (If you have certificates, please photocopy them.**

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**6. A letter of recommendation from your Post Advisor is to be included with this nomination form.**

**The letter should attest to your candidacy for this award.**

**\*\*\*Advisor, what reasons do you nominate your post candidate for this award\*\*\***

**7. Number of community service hours completed: \_\_\_\_\_**

## Part IV Certifications

I am presently in good health, sound mind and have possessed good work ethics. I understand that I must have possessed the desire, dedication, and determination to help others within my Explorer Post. I certify to the accuracy of the foregoing facts in this application.

Explorer Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

### Endorsement of the Post Advisor

This is to certify that the applicant is a member in good standing of \_\_\_\_\_  
Explorer Post # \_\_\_\_\_.

Charter Organizations: \_\_\_\_\_

Advisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Telephone (     ) \_\_\_\_\_

## Part V Public Relations Data

Local Newspaper Name and City:  
\_\_\_\_\_

Local Radio/Television Station(s):  
\_\_\_\_\_

Call Letters and Phone Numbers

Enclosed is a photograph of me, which may be used for publication in the event I am selected.

## Authorization

I, \_\_\_\_\_ do hereby state that all of the information I have given is correct. I also give the FSEA Patrick Walshe Committee the right to check the information I have given. I understand if any of the information given is false, the committee holds the right not to accept it.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

## SELECTION COMMITTEE APPROVAL

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

Date Reviewed: \_\_\_\_\_

Committee Chairman's Signature: \_\_\_\_\_

Committee Member Signature: \_\_\_\_\_

Committee Member Signature: \_\_\_\_\_

Committee Member Signature: \_\_\_\_\_

Committee Member Signature: \_\_\_\_\_