Louisiana Civilian Honor Medal Application

Honoring Service to Our Military and Veterans

Eligibility Criteria

- Nominee is a current resident of the State of Louisiana.
- Nominee does not have a criminal record and is of good moral character.
- Nominee is one of the following: (1) a civilian state employee recognized for exceptional service or achievement to military and veteran programs; or (2) a civilian who has demonstrated important contributions and unwavering commitment to the military and veteran communities of the State of Louisiana and our country.
- Recipients are selected at the sole discretion of the Secretary of the Louisiana Department of Veterans Affairs.
- The Civilian Honor Medal is distinguished from the Veterans Honor Medal by a white ribbon.

NOTE: Please send ONLY copies of supporting documents, no originals!
LDVA will not return documents.

Nominee's Information

Name: _____ Date of Birth (mm/dd/yyyy): _____

Mailing Address: _____ Parish: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Home Phone: _____ Cell Phone: _____

Employer/Organization: _____ Position/Title: _____

Nomination Category (check one):

☐ Civilian state employee: exceptional service or achievement to military and veteran programs

☐ Civilian: important contributions and unwavering commitment to the military and veteran communities

If a state employee, Agency: _____ Years of Service: _____

Nominator Information

(To be completed by those nominating someone other than themselves)

Name: _____ Relationship to Nominee: _____

Organization/Agency (if applicable): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Home Phone: _____ Cell Phone: _____

Please mail completed form and any supporting documents or letters of support to:
Louisiana Department of Veterans Affairs, ATTN: Honor Medals Administrator
P.O. Box 94095, Baton Rouge, Louisiana 70804

Revised 09/2026

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Reasons for Nomination

Describe why the nominee should receive the Civilian Honor Medal. Include specific contributions, service, or achievements on behalf of Louisiana's military and veteran communities; the organizations or programs involved; approximate dates; and the impact of the nominee's work. Attach additional pages or letters of support if needed.

Dates of Service/Involvement (from/to): _____ Est. Hours or Years: _____

Organizations or Programs Supported: _____

Additional pages attached: ☐ Yes ☐ No Number of letters of support attached: _____

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Please check the nominee's delivery preference:

☐ I would like the medal presented at a Civilian Honor Medal Ceremony conducted by LDVA or by a designee of LDVA authorized in writing.

☐ I would like the medal mailed through the U.S. Postal Service to the nominee's address listed above.

☐ I would like the medal delivered to the LDVA Parish Service Office in the nominee's parish of residence.

Certification

I certify that the information provided in this nomination is true and accurate to the best of my knowledge. I understand that the nominee must be a Louisiana resident, must not have a criminal record, and must be of good moral character, and that the Louisiana Department of Veterans Affairs may verify the information provided.

Nominator Signature: _____ Date: _____

FOR LDVA OFFICE USE ONLY

Date Received: _____ Reviewed By: _____

Decision: ☐ Approved ☐ Not Approved Date Medal Delivered: ___/___/_____

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