

NORTH STATE LAW ENFORCEMENT OFFICERS ASSOCIATION
JOHN MARABLE AWARD
APPLICATION

Candidate Name _____

Address _____

City, Zip Code _____

Telephone number(s) _____

Local Chapter _____

Chapter Address _____

How long has candidate been a member? _____

Candidate department/agency _____

Is candidate current with local and state dues/assessments? _____

Reasons for nomination (Give facts supporting award) Attach additional sheets if necessary.

Photo Attached? _____ Date Submitted _____

Signature of Chapter President _____

Submit to the State President