



Department of Ohio Plan of Action

PAST PRESIDENTS PARLEY

CHAIRMAN

Kristen McLaughlin
17324 Independence Ct.
Brook Park, OH 44142-3530
(216) 265-9611
Email –kl1721 @yahoo.com

REPORT DUE: April 15, 2023

Department Report Form

This Form should be attached to each narrative that is submitted for information, Citation of Merit requirements and possible Department award. Please fill out the information as completely and accurately as possible. A Unit must submit this report form with boxes completed and answer the questions below in order to earn the Citation of Merit. Narrative - word count must follow directions given in award guidelines. Simple or elaborate stories will be accepted as a report.

Please complete the following. Be sure to give the complete name of your Unit: _____

District	Unit #	Unit Membership Goal	Unit Membership Total As of Report			
Name of Person Completing Report:			Unit Chair.		Unit Pres.	
Phone #	Email	Membership ID (if available)				
Specific Award Name(if applicable)						

Answer the following Questions in your narrative.

Narrative must be typed written in narrative form.

Narrative must not exceed 1,000 words. (Can be fewer words if program dictates)

Narrative may include photographs and news articles.

- When was you Past Presidents Parley established? _____
- In your Past Presidents Parley, how many members do you have? _____
- How many of your Past President Parley members have participated in activities? _____
- What activities have your Past Presidents Parley done during the past year? _____
- How much money has your Unit contributed to the Nurse’s Scholarship? _____

Mail to Department Past Presidents Parley Chairman

Department of Ohio Plan of Action



American Legion Auxiliary National Security Report and Award Cover Sheet

**Please note, your report will also be viewed as an award entry if this cover sheet is attached.
Complete the following if you are applying for a member award.**

Unit #: _____ Full official unit name: _____

Name of state where you are a member: _____

Nominee's Full Name: _____ ALA member ID#: _____

Address _____

Phone number: (____) _____

Email address: _____

Department National Security Chairman: _____

Address: _____

Phone number: (____) _____

Email address: _____

For a unit award or to submit a year-end unit narrative report, please complete this section. Be sure to give the complete name of your unit. The award certificate will be prepared using the information you include below.

Unit #: _____ Full official unit name: _____

Name of department: _____

Unit president/chairman (**circle one**) name: _____

Above listed person's ALA member ID#: _____ Phone number: (____) _____

Email address: _____

For a department award or to submit a year-end department narrative report, please complete this section:

Name of department: _____

Name of department chairman: _____

Chairman's phone number: (____) _____ ALA member ID#: _____

Chairman's email address: _____

Department of Ohio Plan of Action

PAST PRESIDENTS PARLEY

Key Program Statements:

- The Past Presidents Parley is a forum that brings together the experience of our former presidents and utilizes their expertise in active service to the American Legion Auxiliary.
 - Members who have been president of a unit, department, or the national organization are encouraged to contribute to the Auxiliary as members of the Past Presidents Parley. These leaders share their wisdom and provide ongoing mentorship to empower and bolster the Auxiliary's present leaders, ensuring the continuity and strength of the organization at all levels.
 - The Past Presidents Parley recognizes and honors
 - Women veterans
 - Women currently serving in the military
1. **Objective Goal:** Promote Mentoring and Leadership opportunities to all members.
 - a. **Action Step:** As new leaders are elected and appointed, work with them to acquire knowledge of their position as needed.
 - b. **Action Step:** Share your knowledge with all members and acknowledge their work as well.
 2. **Objective Goal:** Current and Future Leadership at All Levels
 - a. **Action Step:** Lead by example. Work side by side with members to show members how to work for the same outcome.
 - b. **Action Step:** Continue to participate in Unit activities and encourage others to join you.
 - c. Encourage current leaders to consider future leadership opportunities at Unit, District and Department levels.
 3. **Objective Goal:** Form a Past Presidents Parley in your Unit if none exists.
 - a. **Action Step:** Talk with the Unit's Past Presidents and encourage forming a PPP.
 - b. **Action Step:** Have some ideas and goals in mind with regard to what a PPP can accomplish.

PAST PRESIDENTS PARLEY RESOURCES

- Americanism National Facebook page: <https://www.facebook.com/groups/571603919606422/>
- ALA National website: <https://legion-aux.org>

Year-End Report

Annual reports reflect the program work of units in the department and may result in a national award for participants if award requirements are met. **Each Unit Past President Parley chairman is required to submit a narrative report by April 15, 2023, to the Department Past President Parley Chairman.** (address on front of POA)

Department of Ohio Plan of Action

NATIONAL AWARD INFORMATION & DEADLINE

Salute to Servicemember Award – see award nomination form for nomination criteria.

This award has been moved to National Security. Please look for it there.

DEPARTMENT AWARD INFORMATION & DEADLINE

Past President's Parley Plaque

Best Annual Report based on a narrative. Narrative sent to the Department Past President's Parley Chairman Kathy Heichel by **April 15, 2023**.

Jo Hrabak Plaque

Unit contributing the largest monetary donation to the Past Presidents Parley Nurses Scholarship Fund. Award will be determined by total dollars collected thru **June 1, 2023, and** is to be calculated by Department HQs.

Past Presidents Parley - Nurses' Scholarship – see scholarship application at back of this POA. When application is completed, it must be sent to Unit for signature by **May 1, 2023**, and Unit is to forward the application on to the Past President Parley Chairman by **May 15, 2023**.

Past President Parley Dues – Unit to pay dues to Department for all living Past Presidents and are \$5.00 per President. Dues were increased at the 2022 Department Convention to be effective with the 2022-2023 dues. Remittance form is attached to this POA.

Department of Ohio Plan of Action

AMERICAN LEGION AUXILIARY
Department of Ohio, Inc.

PAST PRESIDENTS PARLEY
DUES REMITTANCE FORM
2022-2023

Please enclose a separate check for payment with completed form to:

AMERICAN LEGION AUXILIARY
DEPARTMENT HEADQUARTERS
PO BOX 2760
ZANESVILLE OH 43702-2760
(740) 452-8245

District # _____ Unit # _____ Check # _____

Total number of PPP members _____ X \$5.00 each = \$ _____

Names of Past Unit Presidents

(Type or print clearly - Additional names may be listed on reverse side)

- | | |
|-----------|-----------|
| 1. _____ | 11. _____ |
| 2. _____ | 12. _____ |
| 3. _____ | 13. _____ |
| 4. _____ | 14. _____ |
| 5. _____ | 15. _____ |
| 6. _____ | 16. _____ |
| 7. _____ | 17. _____ |
| 8. _____ | 18. _____ |
| 9. _____ | 19. _____ |
| 10. _____ | 20. _____ |

Please mail cards to: Name _____
Address _____
City/State/Zip _____
Phone number _____

Department of Ohio Plan of Action

Department of Ohio Plan of Action



AMERICAN LEGION AUXILIARY Department of Ohio

PAST PRESIDENTS PARLEY - NURSES' SCHOLARSHIP

2021-22 INSTRUCTIONS FOR THE 2022-23 SCHOOL YEAR

The American Legion Auxiliary Department of Ohio, Past Presidents Parley, has a program to assist students pursuing a degree in the nursing field. The scholarships are available from Department Headquarters: American Legion Auxiliary, Scholarship Coordinator PO Box 2760, Zanesville, Ohio 43702-2760 or can be downloaded from the www.alaohio.org web site found under the Scholarship tab. Local Auxiliary Units should contact their local high schools on the availability of this scholarship.

1. The applicant must be an honorably discharged veteran or a spouse, son, or daughter (adopted, step, grand, or great-grand) of a living, deceased, or disabled honorably discharged veteran who served during these active war dates:
 - ◆ Due to the July 30, 2019, signing of the **Let Everyone Get Involved with Opportunities for National Service – The LEGION ACT** – eligibility for membership in The American Legion has been changed from the former seven war eras to two:
 1. April 6, 1917 – Nov. 11, 1918
 2. Dec. 7, 1941 – current.
2. Attach to this application a **photocopy** of the veteran's Certificate of Release or Discharge from Active Duty (Form DD-214) or other government document showing time served on active military duty during the eligibility period(s) indicated above.
3. The applicant must be a resident of Ohio.
4. The applicant must be sponsored by an Ohio American Legion Auxiliary Unit.
5. The scholarship may be used at the nursing school of the student's choice. Proof of acceptance must be attached to application.
6. Accompanying the application must be three letters of recommendation from:
 - 1) A member of the clergy or a representative to attest to devotional beliefs.
 - 2) A representative of the community.
 - 3) The applicant stating his/her financial need and why he/she feels they are deserving of this scholarship.
7. The applicant must sign and date the application.
8. The completed application must be returned to the American Legion Auxiliary Unit by **May 1, 2023**.
9. The Unit President must sign the application and forward it by **May 15, 2023**, with all supporting documents, to the Department Past Presidents Parley Chairman:

Kristen McLaughlin
Past President Parley Chairman
17324 Independence Ct.
Brook Park, OH 44142-3530

(Over for Application)

Department of Ohio Plan of Action

PAST PRESIDENTS PARLEY - NURSES' SCHOLARSHIP

2021-22 APPLICATION FOR THE 2022-23 SCHOOL YEAR

Name of Applicant _____					
Address _____		Birth Date ____/____/____			
City _____, Ohio _____		(____) _____ - _____			
Zip Code		Phone Number			
Email Address: _____					
Name of Veteran _____					
Veteran Affiliation:	Wife	<input type="checkbox"/>	Husband	<input type="checkbox"/>	
(Indicate with (s))	Daughter	<input type="checkbox"/>	Son	<input type="checkbox"/>	
	Adopted Daughter	<input type="checkbox"/>	Adopted Son	<input type="checkbox"/>	
Self	<input type="checkbox"/>	Step-Daughter	<input type="checkbox"/>	Step-Son	<input type="checkbox"/>
		Granddaughter	<input type="checkbox"/>	Grandson	<input type="checkbox"/>
		Great Granddaughter	<input type="checkbox"/>	Great Grandson	<input type="checkbox"/>
Have you previously received a PPP Nurses Scholarship from the American Legion Auxiliary? Yes ____ No ____					
College Name and Address _____					

Current Enrollment _____					
Signature of Applicant _____		Date ____/____/____		(____) _____ - _____	
				Phone Number	
Signature of American Legion Auxiliary Unit President _____		District/Unit Number ____/____		(____) _____ - _____	
				Unit President's Phone Number	
Submit to: Kristen McLaughlin Past President Parley Chairman 17324 Independence Ct. Brook Park, OH 44142-3530					