



**Fort Carson Kit Carson Volunteer  
Service Award  
Award Packet  
(THIS FORM MAY BE DUPLICATED)**



**PART I – VOLUNTEER INFORMATION**

**VOLUNTEER NAME:** \_\_\_\_\_

**RANK (if applicable):** \_\_\_\_\_

**HOME ADDRESS:** \_\_\_\_\_

**HOME PHONE NUMBER:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**WORK PHONE NUMBER:** \_\_\_\_\_

**AWARD(S) PREVIOUSLY RECEIVED:** \_\_\_\_\_

**ORGANIZATION/AGENCY WHERE THEY VOLUNTEER:** \_\_\_\_\_

**SUBMITTING AGENCY:** \_\_\_\_\_

**SUBMITTED BY:** \_\_\_\_\_

(Print or Type Name)

(Signature)

**PHONE NUMBER / EMAIL:** \_\_\_\_\_

**PART II –JUSTIFICATION MEMORANDUM**

**PART III – PROPOSED CITATION**

**SUBMIT ALL REQUIRED DOCUMENTS TO THE AVCC, 6303 WETZEL AVE., BLDG 1526,  
TEL 526-1082 / [JOSESIMO.R.BAUTISTA.CIV@MAIL.MIL](mailto:JOSESIMO.R.BAUTISTA.CIV@MAIL.MIL) NLT 30 DAYS PRIOR TO  
THE PRESENTION DATE.**