



**Ralph Day Security Officer of the Year Award
Security Services Council**

Award Nomination Form

This form can be completed electronically or by printing. Either e-mail or print out this completed form (with any additional pages) to your RVP and he or she will mail or e-mail to:

Rocco L. DeFelice
Securitas
Two Campus Drive
Parsippany, NJ 07054

Due date: June 30

E-mail: rocco.defelice@securitasinc.com

I hereby certify that the following information pertaining to this Security Officer's nomination is true to the best of my knowledge.

Region Vice President Name Region Vice President Signature Date

Region Vice President Contact Information (include phone number and e-mail address)

Chapter Number Chapter Name Date

Chapter Chairperson Name Chapter Chairperson Signature

Chapter Contact Information (include phone number and e-mail address)

Part I Nominee Information

Security Officer Name

Title Employer

Years Employed in Relevant Position

Years Employed in Security Industry

All award nominees must meet all state and/or local legal, licensing and training requirements as proscribed by the jurisdiction where the nominee is employed. In addition, nominees must be found to have good moral character, be in good standing with his employer and not have committed any serious misdemeanors or felonies.

Additional Comments



**Ralph Day Security Officer of the Year Award
Security Services Council**

Award Nomination Form

Part II **Please describe why this nominee deserves the Ralph Day Security Officer of the Year Award.**

Part III **Submitter's Information**

Submitter's Name

Submitter's Contact Information (include phone number and e-mail address)

Additional Information