

NEWFOUNDLAND AND LABRADOR POLICE AND PEACE OFFICERS MEMORIAL APPLICATION

Please provide the following required information and submit with a recent photograph of the Police/Peace Officers.

All applications must be signed by the Chief of Police or Director of the Organization
Deadline for submission: September 1; August 1 for Historical Names. Files received after these dates will be honored the following year.

1. **Full Name:** _____

2. **Name to be recorded on Memorial:** _____

3a. **Date of Birth:** _____ **b. Date of Death:** _____
Day Month Year Day Month Year

4. **Rank:** _____

5a. **Date Appointed:** _____ **b. Years of Official Service:** _____
Day Month Year

6. **Next(s) of Kin:**
Name: _____ **Name:** _____

Address: _____ **Address:** _____

Relationship: _____ **Relationship:** _____

Telephone: _____ **Telephone:** _____

Email: _____ **Email:** _____

7. **Branch of Service on date of death:** _____

8a. **Branch of Service Submitting Application:** _____

b. **Address:** _____

c. **Name of Contact Person (include telephone, email, address etc...):** _____

9. **Full details of incident causing death:** _____

10. **Photograph:** Attached _____ To Follow _____

Name of Chief or Director (please print)

Signature of Chief or Director

Date

FOR INTERNAL USE ONLY	
Application received: _____	Approved: YES ___ NO ___ If no, reason _____
_____ Approved by: _____	