



# Governor's Medal of Heroism Nomination Form

**Eligibility Criteria Pursuant to Florida Statute 112.194:**

The Governor may award a Medal of Heroism of appropriate design, with ribbons and appurtenances, to

- 1) a law enforcement, correctional, or correctional probation officer, as defined in s. 943.10(14);
- 2) a firefighter, as defined in s. 112.191(1)(b);
- 3) an emergency medical technician, as defined in s. 401.23(11);
- 4) or a paramedic, as defined in s. 401.23(17).

A recipient must have distinguished himself or herself conspicuously by gallantry and intrepidity, must have risked his or her life deliberately above and beyond the call of duty while performing duty in his or her respective position, and must have engaged in hazardous or perilous activities to preserve lives with the knowledge that such activities might result in great personal harm.

**Nominee Information**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Position Title \_\_\_\_\_ DOB \_\_\_\_\_ Years of Service \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Nominee's prior awards/recognition \_\_\_\_\_

Agency Affiliation \_\_\_\_\_

Agency Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Agency Head Name \_\_\_\_\_ Title \_\_\_\_\_

Agency Head Email \_\_\_\_\_ Phone \_\_\_\_\_

**Nominator Information**

Nominator Name \_\_\_\_\_ Position Title \_\_\_\_\_

Nominator Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Nominator Email \_\_\_\_\_ Nominator Phone \_\_\_\_\_

Incident Information (additional materials can be attached) \_\_\_\_\_

**Nominations can be  
mailed to:**

**Mail:** Medal of Heroism Award Nominations  
Executive Office of the Governor  
The Capitol, PL-05  
400 South Monroe Street  
Tallahassee, FL 32399-0001

**Email:** rick.scott@eog.myflorida.com

Questions?

**Phone:** (850) 717-9249