

Chaplain of the Year 2018 – 2019

Mail to: Sandra Johnson-Leu, Chaplain
 103 Covered Bridge Road, Clayton, NC 27520
 Phone: 919-906-7592, ctrysun@embarqmail.com

Auxiliary Nbr: _____
 Mbrship Group: _____

Chaplain's Name: _____

Address: _____ NC _____

Phone Number: (____) _____ email: _____

1. The number of cards sent by Auxiliary Chaplain:
 - a. Sympathy _____
 - b. Thinking of you _____
 - c. Get Well _____
 - d. Other _____

2. Number by Chaplain of the following:
 - a. Visits to sick and bereaved _____
 - b. -Telephone calls, texts or e-mail messages _____

3. Did you and/or your Auxiliary members make visits to your assigned VA Hospital? _____. How many? _____ Are these regularly scheduled events (i.e. Bingo, etc.)? _____

4. Did you and/or your Auxiliary members visit Veterans in other facilities (such as nursing homes)? _____ . How many? _____

5. In your own words, describe how your duties as the Chaplain provided support to your Auxiliary sisters, veterans and their families:

Feel free to send along anything you would like to have considered with this application for Chaplain of the Year. The application is due no later than 1 May 2019.