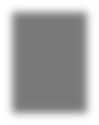
**The Illinois Fire Chiefs’ Association**

**2024 Fire Chief of the Year Recognition Program**



### Deadline: July 19, 2024

#### It is the intent of the Illinois Fire Chiefs’ Association (IFCA) to recognize outstanding contributions to the fire service at the state and national levels.

The IFCA will consider nominations of the ***Fire Chief or the person who is charged with leading the fire department or district by another title (Commissioner, Director, etc)*** in Illinois who have significant, ongoing contributions in our profession. Considerations include, but are not limited to, public education, life safety advancements; innovative and entrepreneurial efforts and accomplishments; education and or credential portfolio; public-private sector contributions, Community involvement and other significant recurring performance hallmarks.

Recipients of recognition by Illinois Fire Chiefs Association may be recommended for further consideration at the national level.

**To apply, complete the application, a letter of nomination and the additional information listed on the application. The application package should be submitted electronically to** [**FCOY@illinoisfirechiefs.org**](mailto:FCOY@illinoisfirechiefs.org) **no later than July 19, 2024.**



ILLINOIS FIRE CHIEF OF THE YEAR NOMINATION FORM DEADLINE JULY 19, 2024

Nominee Information

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Click here to enter text. | Click here to enter text. | | | | Click here to enter text. | Click here to enter text. | | | | Click here to enter text. | |
| Rank or Title | First Name | | | | Middle Initial | Last Name | | | | Suffix | |
| Click here to enter text. | | | Click here to enter text. | | | | Click here to enter text. | | | | Click here to enter text. |
| Fire Department/District Name | | | Address | | | | City | | | | Zip Code |
| Click here to enter text. | | Click here to enter text. | | | | | | Click here to enter text. | | | |
| Fire Department/District Phone | | Immediate Supervisor Name | | | | | | Immediate Supervisor Title | | | |
| Click here to enter text. | | | | Click here to enter text. | | | | | Click here to enter text. | | |
| Immediate Supervisor Email | | | | Immediate Supervisor Work Phone | | | | | Immediate Supervisor Cellular Phone | | |

Nominator Information

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Click here to enter text. | Click here to enter text. | | | Click here to enter text. | Click here to enter text. | | | Click here to enter text. | |
| Rank or Title | First Name | | | Middle Initial | Last Name | | | Suffix | |
| Click here to enter text. | | | Click here to enter text. | | | Click here to enter text. | | | Click here to enter text. |
| Affiliation | | | Address | | | City | | | Zip Code |
| Click here to enter text. | | Click here to enter text. | | | | | Click here to enter text. | | |
| Email Address | | Work Phone | | | | | Cellular Phone | | |

***Please check one of the following recognition categories that will apply to the Nominee:***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***Category*** | | ***Type*** | ***Description*** | | |
|  | ***A*** | ***Full Time*** | Paid Department/District with:  All career firefighters. | *AND* | With a community population in  ***excess*** of 25,000. |
|  | ***B*** | ***Full Time*** | Paid Department/District with:  All career firefighters. | *AND* | With a community population ***at* or *under*** 25,000. |
|  | ***C*** | ***Part Time*** | Paid or Combination department/district with: Career, Paid Paid-On-Call, Paid-On-Premise, volunteers, or any combination of these | *AND* | Any size community |
|  | ***D*** | ***Volunteer*** | Only volunteer members with no or nominal  compensation | *AND* | Any size community |

A successful application will follow and/or contain the items below:

A completed application (this page) for the nominee **[required]**

A letter from the nominator describing the reason for the nomination **[required]**

A profile of the Department or District **[required]**

A resume, curricula vitae or biography of the nominee **[required]**

Letters of support from those with knowledge of the nominee **(no more than five accepted)**

Leader of the department or district for a minimum of 1.5 years **(recommended)**

All documentation must be in electronic format (pdf preferred)

Submit all items together via email to: FCOY@illinoisfirechiefs.org

All submission **MUST** be emailed by July 19, 2024 no later than 4pm.

Submissions should also include **community involvement** of the applicant.

To assist nominators in completing successful applications, a sample application is available at [www.illinoisfirechief.com\FCOY](http://www.illinoisfirechief.com\FCOY). For additional information, contact Tom Styczynski at [tstyczynski@villageofalsip.org](mailto:tstyczynski@villageofalsip.org).

The Fire Chief of the Year Committee will meet to review the applications and all applicants and submitters will be contacted in early August. The 2024 Chief of the Year will be awarded at the IFCA combined conference, time and date to be determined.