******NJ 782nd AIR FORCE JUNIOR ROTC GROUP**

Jackson Memorial and Liberty High Schools

101 Don Connor Blvd.

# Jackson, New Jersey 08527-3499

# Telephone (732) 833-4642

The Air Force Junior Reserve Officers’ Training Corps (AFJROTC) NJ 782nd Group has established and maintains a “Hall of Honor” within both Jackson Memorial and Jackson Liberty High Schools to recognize and honor all graduates who have served, or are currently serving, in our armed forces.

 If you are interested in having a loved one, or yourself, recognized in either hall, please complete this application and send it to the address below with an **8x10** photograph (portrait orientation) of the graduate in their **military uniform**. The display will include the name, branch of service, and graduating class. The “Halls of Honor” are located in the main lobby of the Memorial Building, extending down the southern hallway of Jackson Memorial High School and the main lobby of Jackson Liberty High School. If you have any questions, please feel free to contact Colonel Spare or Senior Master Sergeant Cotter in the AFJROTC office at (732) 833-4642 or via email at jspare@jacksonsd.org or mcotter@jacksonsd.org.

Send application and photo to: Jackson Memorial High School

ATTN: AFJROTC

 101 Don Connor Blvd.

#  Jackson, New Jersey 08527-3499

**Application for “Hall of Honor”**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Branch of the Military:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year Graduated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Jackson Memorial or Jackson Liberty (circle one)

Did graduate complete the Air Force Junior ROTC Program? Yes \_\_\_\_ No \_\_\_\_

Any other additional information you would like to submit to be considered for display:

(ie: Bronze Star, Purple Heart etc.) **Please include a copy of the order/citation. If no longer Active Duty/Guard/Reserve or retired, INCLUDE A COPY OF THE DD FORM 214.**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Person submitting this form)