THE AMERICAN LEGION - DEPARTMENT OF OREGON

2020-2021 QUESTIONNAIRE

NUMBER 16 – BACK TO GOD PROGRAM

COMPLETED FORM DUE AT DEPARTMENT BY MAY 15, 2021.

Please Print or Type

Post Name _______________________________  Post No. _____________
Number of members in Post ________  Date ________________

1. Did your Post open and close its meetings with prayer? Yes _____ No ______
   Number of meetings held ______
   Number of times prayer was used in opening ______ and closing of meetings ______

2. What religious programs or ceremonies have been sponsored by the Post?
   Give details:
   ____________________________________________________________________
   ____________________________________________________________________
   ____________________________________________________________________
   ____________________________________________________________________
   ____________________________________________________________________

3. What religious programs or ceremonies have the Post participated in but did not sponsor?
   Explain extent of participation:
   ____________________________________________________________________
   ____________________________________________________________________
   ____________________________________________________________________

4. Were physically disadvantaged persons or senior citizens transported to Church, under your sponsorship? Yes ____ No ___

5. What has the Post done in advertising religious activity in your community?

   a. Religious news editorials:
      Number _____
      Kind __________________
b. Posted signs:
   Number _____
   Kind __________________

c. Distributed literature? Yes _____ No _____

d. Religious theme parade floats, etc. Yes _____ No _____
   (Give details. On separate sheet of paper)

6. Did the Post Chaplain make calls or visit the sick Veterans in the Post community? Yes____ No____
   (Give details on separate sheet of paper)

7. Write up why Post Chaplain should be selected as Chaplain of Year and attach to questionnaire.

Commander ______________________  Adjutant: _____________________________

Signature    Signature

Judged and presented by: Department Chaplain