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National Headquarters Guidelines for Cancelling a Post and/or Squadron

- 1. For a Post to be considered for cancellation by the NEC The Department must complete the following forms:
 - A. Request for Post Charter Cancellation
 - B. Post Charter Cancellation Check List

These forms can be found in the Department Adjutant's Administrative Manual or by contacting National's Charter Clerk.

- 2. Attach any minutes/resolutions the Post may have submitted to the Department.
- 3. When a Post is cancelled the SAL, if applicable, will be cancelled as well. A Squadron **cannot** stand alone, it must have a Post attached.
- 4. Charters will only be considered for cancellation at the NEC meetings, which are held in the Spring, August (National Convention), and Fall.
- 5. The Post number, once cancelled, cannot be re-used for one year.
- 6. All proper paperwork needs to be submitted to the Charters Clerk. A cut off date will be e-mailed to all the Departments when cancellations need to be submitted to National.
- 7. The Post(s) that are submitted will be given to the Liaison assigned to your Department for review.
- 8. If the proper forms are not filled out completely and to the satisfaction of the Charters Clerk at National the forms will be returned to the Department for completion.
- 9. When a Post and/or Squadron are approved for cancellation a letter is sent to the Department along with a list of members that are still showing in the Post/Squadron.
- 10. Be sure to fill out ALL of the fields. If you need information on a Post such as the date of charter etc. PLEASE contact Department HQ for this data.

Revised: JUL / 2023

Department:



THE AMERICAN LEGION POST CHARTER CANCELLATION CHECK LIST

(One Check List per Post is required to be completed / submitted)

Area and District Post Development/Revitalization Teams are requested to take the following steps prior to forwarding a request to the DEC for a Post Charter cancellation. Please submit the completed form to:

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<u>Note</u>: Please provide information regarding the questions, actions, or comments in the space provided. If additional space is necessary please attach the required information to this form.

- ${\bf 1.} \quad {\bf Determine\ the\ veteran\ population\ in\ the\ community\ and\ surrounding\ area\ of\ the\ Post.}$
- 2. Contact the remaining members and Post Officers to determine if the Post is receptive of new membership and leadership mentoring.
- 3. Contact Department Headquarters for a list of active and expired Headquarters Post members in the zip code of the proposed Post Charter cancellation. Use these names for contacts for membership.
- 4. Does the Post hold scheduled monthly meetings? If not, when was the last meeting held and what was the purpose of the meeting?
- 5. Determine if the Posts' Membership is aware of the request for charter cancellation.
- 6. Determine programs and services the Post might provide for the community and the veterans of the community.
- 7. Is there a school, county seat, prison, or veteran's center in the area? If yes, what programs and services has the Post provided for them? If none, was there a time when the Post did provide activities and services? Please explain:

8. Is the communities population growing or declining? How so? 9. Has the Post been made aware of the help they can receive from the Post Development/ **Revitalization Team?** 10. Has the Post Development/Revitalization Team contacted veterans in the area and the expired and active Headquarters Post membership for their input and assistance in developing or revitalizing the Post? 11. Do they have a Post home or meeting place? 12. Does the Post have any ceremonial rifles and/or static military equipment? If so, what actions are being taken to secure the rifles? **Team / Individual Recommendation:** The Post Development/Revitalization Team is recommending the following action based upon their research and the communities input: Revitalize the existing post Charter a new post for the area or community Merge the existing membership with a newly chartered post Recommend cancellation of the post charter with no action to follow Merge the membership into an area post or the Headquarters Post, after the NEC has accepted the Departments request for Post cancellation Please note the teams decision or plan of action by selecting the check box above that applies. Comments should be provided. Post Development/Revitalization Team member responsible for doing the evaluation: ** select the applicable check boxes below **Contact Name: Department Team** Address: **Area Team** (include city, state & zip) **District Team Telephone Number: List Team Members & Phone numbers:** We certify that the actions above have been completed: Department Commander - signature Department Adjutant - signature Date Date Format: mm/dd/yyyy { select date by clicking inside box }

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THE AMERICAN LEGION POST CHARTER CANCELLATION FORM

Pursuant to NEC Resolution No. 27 adopted by the National Executive Committee in regular meeting assembled in Indianapolis, Indiana, on May 4-5, 1983, this approved form must be completed by Departments and submitted to the National Executive Committee when requesting Post Charter cancellation. Action will be taken on the request for Post Charter cancellation at the next regular scheduled meeting of the National Executive Committee.

By action of the Department Executive Committee of The American Legion, Department of

, request is hereby submitted to cancel the Post Charter of

the below listed American Legion Charter of the below listed American Legion Post.

Post Name:	Post Number:

Squadron: YES OR NO Post Location:

Highest Membership Ever Recorded

Total Post Membership For The Last Five (5) Years:

YEAR **MEMBERSHIP**

NOTE: Please leave fields blank if unknown.

Date Format: Temporary Charter Date: nm/dd/yyyy

{ select date by clicking inside box }

Permanent Charter Date: Date Format: mm/dd/yyyy { select date by clicking inside box }

Supplemental Charter Date: Date Format: mm/dd/yyyy

{ select date by clicking inside box }

Reason Post Charter Cancellation is Requested:

THIS IS TO CERTIFY THAT THE ABOVE ACTION WAS TAKEN BY OUR DEPARTMENT EXECUTIVE COMMITTEE.

DEPARTMENT ADJUTANT OR COMMANDER:

(PRINTED NAME)

DEPARTMENT ADJUTANT OR COMMANDER:

(SIGNATURE)

DATE:

Date Format: mm/dd/yyyy

{ select date by clicking inside box }

NOTE: Final approval will be determined by The American Legion National Executive Committee. All post cancellation requests must be submitted through the Department American Legion state office. Any forms received directly at National Headquarters will be forwarded to the Department state office for authorization and endorsement.

THE POST CHARTER CANCELLATION CHECK LIST IS REQUIRED WITH THIS FORM **

DUPLICATE THIS FORM AS NECESSARY

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