

AMERICANISM~PATRIOTIC INSTRUCTOR
Year End Report 2026-2027

Due: April 15, 2027
Send to: Doreen Dale
donndale@gmail.com

Name of Auxiliary _____ Aux # _____ District# _____

Auxiliary Chairman _____ Phone # _____

1. What type of American **POP** signs did you create or make note of to promote Americanism? _____

2. How did your Auxiliary utilize any of the Americanism/Patriotic Instruction material available on the MALTA Membership Resources?

3. How did your Auxiliary promote, participate, recognize any traditional patriotic days or branch of service birthdays?

4. What did your Auxiliary do to promote flag education in the schools and in your community? _____

Did your Auxiliary purchase and offer to replace any flags needing retirement? How many and where _____

5. How many American Flags _____ and POW/MIA Flags _____ did your Auxiliary distribute or present?

(B) Did your Auxiliary host a Flag Retirement Ceremony? Where and when?

6. How many Patriotic Appreciation, Citations of Appreciations or Respect for Flag Citations presented to citizens and/or businesses in recognition for displaying the American Flag, POW/MIA Flag and/or other displays of American Pride?

_____ How Many _____ and locations _____

7. How did your Auxiliary Promote Flag education in schools and community _____

8. (b) Did your Auxiliary recognize an Outstanding Community Flag display? _____

9. What did your Auxiliary do to promote Americanism/Patriotic Instruction in you Auxiliary room, Community or Classroom? _____

10. Did your Auxiliary demonstrate the spirt of properly caring for the flag and the proper way of folding the flag?

_____ Where and when _____

11. Did you assist in the Smart/Maher VFW National Citizenship Education Teacher Program _____

12. What other programs in your Auxiliary did you work with that included Americanism. _____

*** Please use the back of this sheet or additional paper if you would like to expand on what you did as Americanism/Patriotic Instructor. Please include photos, literature, etc. to include in your report.**

Chairman Signature _____

CC: District & Auxiliary Presidents