



HELICOPTER RESCUE INFORMATION



PLEASE TYPE OR PRINT ALL INFORMATION IN APPLICABLE BLOCKS

LIFE-SAVING RESCUE PERFORMED BY -

FULL NAME – (LAST, FIRST, MIDDLE INITIAL)			CITIZENSHIP		
SOCIAL SECURITY NO.	RANK	BRANCH OF SERVICE	SIKORSKY HELICOPTER MODEL		
DATE OF RESCUE	<input type="checkbox"/> Check only if this is your first rescue using a Sikorsky Helicopter	NO. OF LIVES SAVED THIS RESCUE			
FIRST RESCUE?	UNIT TYPE -		SEARCH & RESCUE	OTHER	
PILOT	COPILOT	CREW MEMBER			
TIME OF RESCUE			PLACE OF RESCUE		

Please summarize the mission below and include number of lives saved. Forms may be returned to Sikorsky by e-mail RescueAward@Sikorsky.com or mailed to postal address below. Substantiating mission reports and images may be attached electronically or mailed to Sikorsky. For questions or more information, please E-mail or call (203) 386-7761. Our FAX is (203) 386-7300.

CERTIFIED BY – (OFFICER IN CHARGE): _____

	PERSON SUBMITTING THIS REPORT	PERSON TO WHICH AWARD IS TO BE SENT (IF DIFFERENT)
NAME	_____	_____
ADDRESS	_____	_____
CITY/TOWN	_____	_____
STATE/PROVINCE	_____	_____
POSTAL CODE	_____	_____
COUNTRY	_____	_____
TELEPHONE	_____	_____
FAX	_____	_____
EMAIL	_____	_____

THIS FORM AND SUPPORTING MATERIAL MAY BE SENT TO:

Manager – Humanitarian Communications
P.O. Box 9729

Sikorsky Aircraft Corporation
6900 Main St. S-119A
Stratford, CT 06615-9129, USA
RescueAward@Sikorsky.com