



# THE COUNTY OF CHESTER

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DEPARTMENT OF EMERGENCY SERVICES  
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*Office of the Fire Marshal*

March 21, 2019

The William H. "Pop" Winters award application time has opened again for the year 2018. Last year Chester County emergency services responded to over 400,000 dispatches to provide valuable response to citizens and visitors of Chester County. Some of these services required our responders to rely on their training and placed their own personal safety at risk.

I encourage you to take the time to submit a member of your organization for this award. It is an outstanding opportunity to honor the recipient for their heroic act of courage that they displayed.

Below is a brief on the purpose, background, criteria and further information needed to submit your nominee. We ask that applications be submitted prior to July 1, 2019 and the awarded recipient(s) will be notified before October 1, 2019. The award will be presented at the October Chester County Board of Commissioners' meeting in conjunction with Fire Prevention Week.

Sincerely,

*John A. Weer*

John Weer  
Chief Fire Marshal

## WILLIAM H. “POP” WINTERS AWARD

**Purpose:** The purpose of the William H. “Pop” Winters Award is to recognize a member of the Chester County Fire and Emergency Services who best exemplifies the dedication exhibited by William “Pop” Winters.

**Background:** William H. “Pop” Winters was a loyal member of the Chester County Fire Services for over 60 years. He was also the first Chester County Fire Marshal from 1959 until his death in the line of duty on October 10, 1997. Pop was a tireless and caring public servant who would eagerly respond—whatever the hour and whatever the weather, to assist in emergencies. His abilities as a leader and teacher instilled in others the commitment to excellence that is the hallmark of the Chester County Fire and Emergency Services.

**Criteria:** The award shall be presented to an individual who is a member of a fire, rescue, or EMS agency that serves Chester County. The individual shall embody and exemplify the leadership, dedication, professionalism, commitment to excellence, devotion to duty and service to the community exhibited by William H. “Pop” Winters.

**Nomination:** Nominations for the William H. “Pop” Winters Award shall be submitted on the form prescribed by the County Fire Marshal’s Office and shall include a minimum, two letters of recommendation. Nominations for the previous calendar year must be submitted by July 1.



# THE COUNTY OF CHESTER

## DEPARTMENT OF EMERGENCY SERVICES



### 2018 WILLIAM H. “POP” WINTERS MEDAL OF VALOR AWARD

#### Nomination Application Due no later than July 1, 2019

**In order to qualify for this award, the nominee must be:**

- A member of a fire, rescue or EMS agency that serves Chester County, **and**
- Embody and exemplify the leadership, dedication, professionalism, commitment to excellence, devotion to duty and service to the community exhibited by William H. “Pop” Winters.

#### **SECTION 1: Nominee Information**

<i>Last Name</i>	<i>First Name</i>	<i>MI</i>	
<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Home Phone</i>	<i>Cell Phone</i>	<i>Email</i>	
<i>Affiliation (Fire/Rescue/EMS Agency)</i>	<i>City</i>	<i>State</i>	<i>Zip</i>

#### **SECTION 2: Nominator Information**

<i>Last Name</i>	<i>First Name</i>	<i>MI</i>	
<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Home Phone</i>	<i>Cell Phone</i>	<i>Email</i>	
<i>Affiliation (Fire/Rescue/EMS Agency)</i>	<i>City</i>	<i>State</i>	<i>Zip</i>





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## Nomination Application (Continued)

### SECTION 4: Letters of Recommendation

Please include, at a minimum, (2) letters of recommendation. The letters of recommendation should provide sufficient evidence and information to help the selection committee in making its decision, and should include the author's contact information.

### SECTION 5: Acknowledgement

*Nominators must read and sign below for the nominee to be considered for the award.*

I have read the criteria for the William H. "Pop" Winters award, and I acknowledge that the nominee meets all the stated criteria. I confirm the information included in this application is true and correct to the best of my knowledge.

Name	Signature	Date
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### NOTE TO APPLICANT:

Mail the completed application to the following address:

**Chester County Fire Marshal's Office  
Attn: William H. "Pop" Winters Award  
601 Westtown Road, Suite 012  
West Chester, PA 19380**

### FOR OFFICIAL USE ONLY

Received by: \_\_\_\_\_

Date Received: \_\_\_\_\_ Date Reviewed: \_\_\_\_\_

Award Status:       *Approved*               *Denied*

Date Nominee Contacted: \_\_\_\_\_