



Public Affairs Office  
MEDIA RELEASE FORM

Name of person completing form: \_\_\_\_\_ Phone: \_\_\_\_\_

(Please attach additional page if necessary)

Please describe event to be publicized, such as joining the SCSG, being promoted, training, or receiving an award:

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SCSG member biographical information you wish public, such as city/town where you live, rank, any previous military service, to what section you are assigned, any family information, and any civilian job you currently hold:

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PHOTOS

All photos must be attached in .jpeg format with individuals identified by name and rank.

- Return form along with any photos to: [scott.malyerck@sg.sc.gov](mailto:scott.malyerck@sg.sc.gov) ●