

APPLICATION FOR RENSS. COUNTY HONOR-A-DECEASED VET

Please elaborate on all information concerning the veteran so that we may have a full biography for our pamphlet and ceremony. Submit application with copy of veteran's Report of Separation and copy of veteran's obituary, to the Rensselaer County VSA, 1600 Seventh Avenue, Troy, NY 12180 or call 270-2760.

NAME:

(Please include maiden name if applicable)

DOB:

PLACE OF BIRTH:

DATE AND PLACE OF ENLISTMENT:

SIGNIFICANT MILITARY ASSIGNMENTS, ACCOMPLISHMENTS, AND AWARDS:

DATE OF SEPARATION:

DATE OF DEATH:

SCHOOLS ATTENDED AND YEARS:

EMPLOYMENT:

PARENTS' NAMES:

(Please include mother's maiden name)

BROTHERS & SISTERS:

SPOUSE:

(Please include maiden name if applicable)

DATE AND PLACE OF MARRIAGE:

CHILDREN'S NAMES:

GRANDCHILDREN:

WHERE DID THE VETERAN GROWUP AND LATER RESIDE?

DID THE VETERAN RETIRE FROM AN OCCUPATION OR AN ORGANIZATION?

WHAT WERE THE VETERAN'S HOBBIES AND/OR SPECIAL INTEREST?

IN WHAT COMMUNITY ACTIVITIES DID THE VETERAN TAKE PART?

DID THE VETERAN BELONG TO ANY SPECIAL ORGANIZATIONS?

FAMILY CONTACT:

NAME:

ADDRESS:

PHONE:

RELATIONSHIP: