

Profile Application for Honoring a Deceased Veteran

Today's Date: _____

Criteria needed: *Veteran must have been a resident of Warren County at some point during their life. Veteran must have passed away 3 or more months prior to this request. This request **MUST BE** accompanied by discharge papers, add'l decoration/award papers (if applicable), obituary and completed profile application.*

Veteran's Name: _____

Address of Residence: _____

Date of Death: _____ Burial Date: _____ Where: _____

MILITARY HISTORY

Check One: WWI WWII Korea Vietnam Persian Gulf OIF/OEF

Other specify _____

Rank: _____ Branch: _____ Unit: _____

Entered Service on: _____ Discharged on: _____

Military Occupation: _____

Overseas Service: _____

Decorations/Awards: _____

PERSONAL HISTORY

Date of Birth: _____ Where: _____

Parent's Names: _____
(Father's full name) (Include mother's maiden name)

Grade School: _____ High School: _____

College: _____ Year graduated: _____ Degree received: _____

Civilian Occupation: _____ Employed by: _____

Number of years: _____ Retired: Yes No Date: _____

Organizational Memberships in: (Civic, Veteran, Fraternal, Social or Political) _____

SURVIVORS

Spouse's Name (include maiden if applicable): _____ of _____

Date of Marriage: _____ Where: _____

Children: _____

Other surviving immediate family: _____

I authorize the NYSDMNA to release any and all awards/medals the deceased veteran may be entitled to:

Next of Kin Print Name Next of Kin Signature / Relationship to Veteran

Address: _____

Phone: _____

(Use other side for additional information)