

APPLICATION FOR "OPERATION RECOGNITION" WWII VETERANS STATE OF WEST VIRGINIA HIGH SCHOOL DIPLOMA

Mail to: Attn: Angela Meadows, West Virginia Dept. of Veteran's Assistance, 1514-B Kanawha Blvd., E, Charleston, WV 25311

MILITARY SERVICE DATE: September 16, 1940 – December 31, 1946

This application is used to establish the eligibility of Vietnam Era service veteran for the receipt of a high school diploma from
STATE OF WEST VIRGINIA

****COPY OF "HONORABLE" DISCHARGE PAPERS REQUIRED AND MUST ACCOMPANY THIS APPLICATION****

VETERAN APPLICANT'S NAME AND PERSONAL INFORMATION: (Type or print legibly)

1. FIRST	2. MIDDLE (or initial)	3. LAST	4. SUFFIX
5. ADDRESS (number, street, apt/unit, city, state and zip)		6. HOME PHONE (include area code)	
		7. WORK PHONE (include area code)	8. EXTENSION
9. DATE OF BIRTH		10. GENDER	
MONTH	DAY	YEAR	male female

VETERAN'S MILITARY SERVICE INFORMATION:

11. BRANCH OF SERVICE	12. SERVICE NUMBER	13. HIGHEST RANK / GRADE ATTAINED

14. PERIODS OF ACTIVE DUTY MILITARY SERVICE:

DATE(S) ENTERED	DATE(S) SEPARATED
_____ MONTH DAY YEAR	_____ MONTH DAY YEAR

HIGH SCHOOL INFORMATION:

Name of High School: _____		County of school attended: _____	
15. YEARS ATTENDED HIGH SCHOOL (1961, 1962, 1963, 1964, 1965, 1966, 1967, 1968, 1969, 1970, 1971, 1972, 1973, 1974, 1975)	16. YEAR LEFT HIGH SCHOOL TO ENTER VIETNAM	17. WHAT WOULD HAVE BEEN GRADUATION YEAR	
19 ____ 19 ____ 19 ____ 19 ____	19 ____	CLASS OF 19 ____	

18. CHECK THE APPROPRIATE ISSUING COUNTY:

- I would like the diploma issued by my county of residence which is _____
- I would like the diploma issued by the county of my high school which is _____

I certify that all information I have provided on this application and the supporting documentation is true and correct to the best of my knowledge. Signed under the penalty of perjury.

Signature of Veteran: _____ Date: _____

To Be Completed By Veteran Rep. & State Bd of Ed. Approved Disapproved (Veteran Rep) Approved Disapproved (WV Board of Education)

Name & Title: _____ Date: _____
(Veteran Rep.)

Name & Title: _____ Date: _____
(WV Board of Education)