



OPERATION RECOGNITION APPLICATION 2/6/04

Application for high school diploma as authorized by the Colorado Board of Veterans Affairs to establish eligibility of service veteran of World War II, Korea and Vietnam era. Copy of honorable discharge papers must accompany this application.

(Name of high school for diploma request)

Diploma can be posthumously applied for by next of kin

MILITARY SERVICE DATES: (veteran must be at least 60 years of age)		
WWII: 12/7/1941-12/31/1946	Korea: 6/25/1950-1/31/1955	Vietnam: 2/28/1961-5/7/1975

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, zip)		6. HOME PHONE (with area code)	
		7. WORK PHONE	
		8. CELL PHONE	
9. DATE OF BIRTH MONTH DAY YEAR	10. SOCIAL SECURITY NUMBER	11. MARITAL STATUS Married ____ Single ____ Widowed ____ Divorced ____	12. GENDER M ____ F ____

VETERAN'S MILITARY SERVICE INFORMATION:

13. BRANCH OF SERVICE	14. MISCELLANEOUS INFORMATION (name & address of next of kin if appropriate.)
15. SERVICE NUMBER	16. HIGHEST RANK/GRADE ATTAINED
PERIODS OF ACTIVITY MILITARY SERVICE 17. DATE(S) ENTERED 18. DATE(S) SEPARATED MONTH DAY YEAR MONTH DAY YEAR	
19. VA FILE NUMBER (if applicable)	

HIGH SCHOOL INFORMATION: (Eligible veterans with GED may apply)

20. YEARS ATTENDED HIGH SCHOOL	21. YEAR LEFT TO ENTER SERVICE	22. WHAT WOULD HAVE BEEN YOUR GRADUATION YEAR
19____ 19____ 19____ 19____	19____	CLASS OF 19____

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 penalty of perjury.
Signature of Veteran, Spouse or Next of Kin _____ Date _____

To be completed by Veteran Representative & School Dept. Vet. Rep: ___Approved ___Disapproved School: ___Approved ___Disapproved
Name & Title (Veteran Rep.) _____ Date _____
Name & Title (School Rep.) _____ Date _____