

CLEVELAND COUNTY VETERANS MEMORIAL APPLICATION

Send to: CCVM Application Committee • P.O. Box 249 • Norman, OK 73070

VETERANS IDENTIFYING INFORMATION *(Please Print Clearly or Type)*

Last Name: _____ First: _____ Middle: _____
Jr: ___ Sr: ___ Other: _____ Male: ___ Female: ___ Service Number: _____
Date of Birth: Month: _____ Day: _____ Year _____ Rank at Release: _____
Current address or final resting place: Street: _____
P.O. Box: _____ Apt: # _____ City: _____ State: _____
Phone: (_____) _____ Email: _____
How is veteran connected to Cleveland County: Born here: ___ Served Here: ___ Trained Here: ___
Address when veteran was connected to Cleveland County: Street: _____
P.O. Box: _____ Apt: # _____ City: _____ State: _____ Years Connected _____
Other: (Please explain) _____
Served In: Army: _____ Navy: _____ Marines: _____ Air Force: _____ Coast Guard: _____
Discharge Characterization: Honorable: ___ General: ___
Other: (Please Explain) _____

Special Status: KIA: ___ MIA: ___ POW: ___ Other: _____
Dates of Active Duty: From: _____ To: _____ From: _____ To: _____
Unit last served with: _____

A qualifying document is requested to review, please provide a copy of:

Assignment Orders: ___ Discharge Orders: ___ Decoration/Award Orders _____
Other: (Please Explain) _____

Member of Veterans Group(s)

American Legion: ___ Veteran Foreign Wars: ___ Disabled American Veterans: ___
Other: (Please Explain) _____

Sponsor's Information if not the veteran named above

Last Name: _____ First: _____ Middle: _____
Relationship to Veteran: _____
Street: _____
P.O. Box: _____ Apt: # _____ City: _____ State: _____
Phone: (_____) _____ Email: _____
Additional Information or Brief Remarks: _____

This information is for the sole purpose of accurately identifying each of our thousands of Cleveland County veterans who desire to be listed on the CCVM memorial. This information will not be used for any other purpose and will not be sold. Your application and the information on it will be held and handled in accordance to the law and in respect for the veteran. The memorial is being funded with donations and grants. Money is not being asked for here, but if you desire to donate any amount we are happy to accept your donation. Please list any amount donated in the remarks section just above. Do not send cash with this application please. However Checks, Money Orders, or Cashier Checks are fine; make these out to the Norman Park Foundation, Inc., a 501(c)(e) not-for-profit organization. Write in the memo section of your donation-CCVM. This is a tax deductible donation. This application is strictly voluntary and is the sole property of the CCVM Memorial.

CLEVELAND COUNTY VETERANS' MEMORIAL (CCVM)

DEFINITION OF A VETERAN

- (*) A VETERAN is defined as any service person that meets the guidelines for membership to *The American Legion* or admittance to a *Veterans' Center* or receives *Veterans Benefits*.**
- (**) A VETERAN is defined as any service person that is missing-in-action (MIA) or killed-in-action (KIA) who entered the service from Cleveland County or a Cleveland County resident who entered the service elsewhere.**

ELIGIBILITY REQUIREMENTS FOR NAMES ON CCVM

- 1. Eligible veterans' (MIAs and KIAs) names shall be engraved into the centerpiece black granite column.**
- 2. Eligible veterans' names shall be included on the Service Wall.**
 - a. An honorably discharged veteran (*) that entered the service from Cleveland County;**
 - b. An honorably discharged veteran (*) from Cleveland County that entered the service elsewhere or that now lives outside Cleveland County;**
 - c. An honorably discharged veteran (*) that now resides in Cleveland County;**
 - d. An honorably discharged veteran (*) that dies while in the Norman Veterans' Center or in the care of a relative who is a permanent resident of Cleveland County;**
 - e. MIA or KIA (**); and**
 - f. Any military personnel killed in the performance of their duty while stationed at any military installation in Cleveland County.**