



Donation Application

Applicant Information

Full Name: _____ Date: _____
 Last First M.I.

Address: _____
 Street Address Apartment/Unit #

City _____ State ZIP Code

Phone:	()	E-mail Address:			
Rank:		Social Security No.:		Desired Donation:	\$
Donation for?					
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Are you currently a member of the Armed Forces or a Veteran?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever received a donation from VFW?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, when?		
Have you sought any other assistance or donation prior to this application?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
If yes, explain:					

Spouse, Widow or Family Member Information

Please fill out if applicant is not currently a member of the armed forces or a veteran.

Full Name:		Relationship:			
SSN:		Phone:	()		
Address:					

Military Service of Applicant, Spouse, Widow or Family Member

Branch:		From:		To:	
Rank at Discharge:		Type of Discharge:			
If other than honorable, explain:					

Brief Description of what donation is for.

Employment

Company:		Phone:	()
Address:		Supervisor:	
Job Title:		Starting Salary: \$	Ending Salary: \$
Responsibilities:			
From:		To:	
		Reason for Leaving If applicable:	
May we contact your supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

Applicant may be asked to meet with committee members in person.

Requested donations will either be in the form of a gift certificate or donations requested for bills due will be released in the form of a check made out to billing agency. Cash donations will only be distributed on a case by case basis.

If this application leads to receiving a donation, I understand that false or misleading information in this application may result in forfeiture of all donations and will make me ineligible for any further donations from VFW Post 2350.

Signature:		Date:	
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