

MERCER COUNTY MILITARY SERVICE MEDAL APPLICATION

Dear Mercer County Veteran:

Please complete the application form and return it with a COPY of your Honorable Discharge or DD 214. If you have any questions, please contact the Veteran Service Office at 609-989-6120. The application and appropriate form should be sent to the following address:

**MERCER COUNTY VETERAN SERVICES
1440 PARKSIDE AVE
EWING, NJ 08638**

Please Print or Type:

Full Name of Applicant: _____

Mailing Address: _____

Phone: () _____ Soc. Sec. # _____

Branch of Service: _____ Rank: _____ Date of Birth: _____

Theater (check any that apply):

WWII _____ Korea _____ Vietnam _____ Desert Storm _____

Iraq _____ Afghanistan _____ Other _____

Signature of Applicant: _____ Date: _____

Next of Kin or Sponsor: _____ Relationship: _____

Address (NofK or S): _____

Phone (NofK or S): _____

All applications must be completed in full and accompanied by a copy of the Veteran's Honorable Discharge or DD214