

Person Making Nomination _____

Address _____

Phone Number _____

Information for EACH Quilt of Valor Recipient - if you have multiple recipients, please respond separately for each one.

Full Legal Name: _____

Nickname: _____

Gender: M F

Address: _____

Residence County: _____

Current Status (Active Duty or Veteran): _____

Branch of the US Armed Forces (if multiple, include all branches served):

Dates of Service: _____

Where did the service member or veteran serve? Please circle all that apply:

- | | |
|------------------|--|
| WWII | Operation Enduring Freedom |
| Korean Conflict | Operation Iraqi Freedom |
| Vietnam Era | Operation New Dawn |
| Persian Gulf War | Gulf War, including Desert Shield and Desert Storm |
| Cold War | Other, be specific: _____ |

Rank at Discharge or Current Rank: _____

Duty Stations: _____

Any additional information or comments you would like to make / provide:

www.govf.org

click on awards & nominations tab and scroll down to complete the online nomination form