

APPLICATION FOR DIPLOMA
WORLD WAR II VETERANS

Name: _____

Current address: _____

Name and address of high school attended: _____

Dates of attendance: _____

Year veteran would have graduated: _____

Date entered military service: _____

Branch of service: _____

I verify that the above information is accurate.

Signature

Date

I am applying on behalf of _____, who is deceased. I verify that the above information is accurate.

Signature

Date

Relationship to Veteran