

SDDOM/SDDVA Fallen Heroes, MIA/POW Bridge Dedication Application

December 2019

SUBMITTER'S INFORMATION

Name:		
Connection to Veteran:	Phone:	
Address:		
City:	State:	Zip Code:
Email:		

VETERAN MILITARY INFORMATION

Veteran's Name:	
Date(s) of Service: From:	To:
Social Security Number:	Service Number, if applicable:
Date of Casualty:	
Place of Casualty:	
Home of Record at Time of Entry:	

DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED

Please list all:

Description of Casualty:

List all Foreign Service:

Preferred State Bridge Site:	Located Near What City:
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SIGNATURE

I certify that the information contained above is true and correct to the best of my knowledge.

Signature of Submitter:	Date:
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For Fallen Heroes Bridge Committee Use Only

 Approved Disapproved

Comments:

Signatures:

SDDVA: _____ SDDOM: _____ Policy: _____

Completed form and supporting documentation should be sent to: South Dakota Department of Veterans Affairs, Attn: Fallen Heroes Bridge Dedication Program, 425 E. Capitol, Pierre, SD 57501.