

War Memorial Veterans Kiosk Honor Roll Application

Mail to:
Onondaga County Veterans Service Agency
Attn: War Memorial Veterans Honor Roll
421 Montgomery St, 10th Floor, Syracuse NY 13202

Requests to have a Veteran's name included on the War Memorial Veterans Honor Roll must be made by the Veteran unless they are deceased. The completed form must be submitted with a copy of the Veteran's Military Separation Record (showing proof of dates of service and honorable discharge); proof of residency in Onondaga County as detailed below; and a copy of the Veteran's death certificate if the application is being submitted by someone other than the Veteran. Supporting documents will not be returned.

Photos can be sent, for future inclusion, on the Honor Roll Kiosk or a .jpeg can be emailed. Please contact the Veterans Service Agency, at 315-435-3219 for the email address.

Last Name: _____ First Name: _____ Middle Initial: _____ Suffix: _____

Current Address: _____ City: _____

State: _____ Zip: _____ Phone: _____ Email: _____

Copy of Military Separation Record, indicating honorable discharge, is attached:
DD 214; WD AGO 53; WD AGO 55; WD AGO 53-55; NAVPERS 553; NAVMC 78PD; or NAVCG 553

Date of entry into military service:

Month: _____ Day: _____ Year: _____

Home of record at time of entry into service (from separation record):

City: _____ State: _____

Copy(ies) of at least one the following in the veteran's name is/are attached:

Property tax bill School tax bill Utility bill Other: _____

Proof of residency in Onondaga County at the time of entry into the Armed Forces
or

Proof of current residency in Onondaga County - AND - proof of residency in Onondaga County for
the previous five (5) years

Military service was completed during one, or more, of the time periods listed below:

- | | |
|---|--------------------------------------|
| <input type="checkbox"/> World War I | April 6, 1917 - November 11, 1918 |
| <input type="checkbox"/> World War II | December 7, 1941 - December 31, 1946 |
| <input type="checkbox"/> Korean Conflict | June 27, 1950 - January 31, 1955 |
| <input type="checkbox"/> Vietnam Era | February 28, 1961 - May 7, 1975 |
| <input type="checkbox"/> Post-Vietnam Era (Includes:
Lebanon, Granada, Panama) | May 8, 1975 - August 1, 1990 |
| <input type="checkbox"/> Iraq and/or Afghanistan | August 2, 1990 Through August 2021 |

I am making this request on behalf of a Veteran who is deceased. Copy of the death certificate is attached.

Last Name: _____ First Name: _____ Middle Initial: _____ Suffix: _____

Current Address: _____ City: _____

State: _____ Zip: _____ Phone: _____ Email: _____

By signing below, I certify that the information provided on this application is true and accurate.