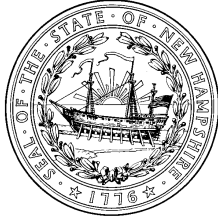


# ELIGIBILITY APPLICATION



## NEW HAMPSHIRE STATE VETERANS CEMETERY

110 Daniel Webster Highway, Boscawen, NH 03303-2413  
 Phone: (603) 796-2026 Fax: (603) 796-6300 Email: info@nhsvc.com

If deceased, please provide date of death below:

Veteran \_\_\_/\_\_\_/\_\_\_ Spouse \_\_\_/\_\_\_/\_\_\_

**IMPORTANT:** A COPY OF THE VETERAN'S DISCHARGE DOCUMENTATION **IS REQUIRED** AND MUST ACCOMPANY THIS APPLICATION (i.e. DD-214 or equivalent discharge documents; must include character of service)

### *VETERAN'S NAME AND PERSONAL INFORMATION (PLEASE TYPE OR PRINT LEGIBLY)*

1. FIRST	2. MIDDLE	3. LAST	4. SUFFIX (Jr., Sr., etc.)
5. MAILING ADDRESS (PO BOX or NUMBER, STREET, APT/UNIT)			6. PRIMARY TELEPHONE ( )
7. CITY	8. STATE	9. ZIP CODE	10. COUNTY OF RESIDENCE
11. VETERAN'S SOCIAL SECURITY #	12. VETERAN'S DATE OF BIRTH	13. EMAIL	
14. MARITAL STATUS <input type="checkbox"/> MARRIED <input type="checkbox"/> NEVER MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED			

### *VETERAN'S MILITARY SERVICE RECORD (As shown on required discharge documents)*

15. SERVICE NUMBER (if applicable)	16. DATE ENTERED SERVICE	17. DATE SEPARATED / RETIRED
18. HIGHEST RANK HELD	19. BRANCH(ES) OF SERVICE	20. MILITARY AWARDS (See reverse for guidance)
21. SERVED DURING (CHECK ALL THAT APPLY – See note on reverse) <input type="checkbox"/> NONE <input type="checkbox"/> WWII <input type="checkbox"/> KOREA <input type="checkbox"/> VIETNAM <input type="checkbox"/> PERSIAN GULF <input type="checkbox"/> Other _____		

### *NON-VETERAN SPOUSE INFORMATION (if last name is not the same, please submit copy of marriage certificate) IF SPOUSE IS ALSO A VETERAN, PLEASE COMPLETE A SEPARATE APPLICATION*

22. FIRST NAME	23. MIDDLE	24. LAST NAME
25. SPOUSE'S SOCIAL SECURITY #	26. SPOUSE'S DATE OF BIRTH	27. EMAIL OR PHONE NUMBER (If different)

### *CONTACT OTHER THAN VETERAN OR SPOUSE (e.g., child, attorney, sibling, friend, etc.)*

28. FIRST	29. MIDDLE	30. LAST
31. RELATIONSHIP TO VETERAN	32. PRIMARY TELEPHONE ( )	33. EMAIL
34. ADDRESS (NUMBER, STREET, APT/UNIT, CITY, STATE ZIP CODE)		

35. PLEASE CHECK WHERE YOU WANT CERTIFICATE OF ELIGIBILITY MAILED:     VETERAN     CONTACT

**CERTIFICATION:** I certify, to the best of my knowledge, that the information entered on this application as well as the supporting documentation is true and correct. I also certify that to the best of my knowledge the veteran or spouse has never committed a capital crime or Tier III sexual offense for which a sentence of death or imprisonment for life may be imposed.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

(Do not write below this line, for completion by cemetery personnel only)

Approved     Denied    Signed: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

See reverse for instructions on completing this form

Revised DEC 2022

## -Completing the Application-

**Pre-certification** establishes veteran and dependent eligibility for interment at the New Hampshire State Veterans Cemetery (NHSVC) in Boscawen, New Hampshire. There is no cost for pre-certification, and it does not oblige the veteran or eligible dependent to be interred at the NHSVC. Pre-certification is intended to reserve a gravesite and to assist the next-of-kin at the time of death. Gravesites are assigned by NHSVC staff at the time of interment.

There is no cost for a veteran interment (except as noted below). Eligible dependent interments incur a fee due at the time of interment. Associated funeral expenses are incurred by the decedent's next-of-kin.

Guidance for completing the application is provided below:

- **Blocks 15 through 19** – Service Record information listed on this application is not in lieu of providing the NHSVC with a copy of DD Form 214 or equivalent discharge document(s). Failure to provide required service record document(s) will delay processing the application. Please provide discharge forms for all periods of service. **Forms must show type of discharge (Honorable, General, etc.). Discharges characterized as “Bad Conduct” or “Other than Honorable” are subject to adjudication by NHSVC staff to determine eligibility. Members of the Guards or Reserves must provide documentation with sufficient proof of successful completion of the initial contracted term of service. Applicants from the Guard and Reserves who are not New Hampshire residents at the time of death may incur a burial fee.**
- **Block 20** – Please list any of the following military awards obtained and provide documentation: Medal of Honor (MOH), Distinguished Service Cross (DSC), Navy Cross (NC), Air Force Cross (AFC), Silver Star (SS), Purple Heart (PH), and POW. Only these awards are officially recognized under the standard inscription lines on the grave marker. All other medals may be recognized in the personal inscription lines.
- **Block 21** – War periods may be added to the grave marker if the veteran served during a war period. Please note that service “in country” is NOT required to receive credit for a war period. Military service during the following dates may qualify for a war period designation:

WWII – 12/7/1941 to 12/31/1946

Korea – 6/27/1950 to 1/31/1955

Vietnam – 2/28/1961 to 5/7/1975

Persian Gulf – 8/2/1990 to Present

For conflicts including Grenada, Lebanon, Panama, Somalia, Kosovo, Philippines, Afghanistan, or Iraq, service “in country” is required.

- **Blocks 22 through 27** – Complete only if the eligible veteran's spouse wishes to be interred at the NHSVC. If the spouse is also a veteran, a separate application must be submitted. If both spouses are veterans, they may be interred together in the same plot or in adjacent burial plots (second spot will be reserved).
- **Blocks 28 through 35** – Complete with contact information of a person, other than the veteran or spouse, who will serve as a point of contact. Check the box in section 35 to designate the primary contact.
- In certain circumstances, dependent children may be eligible for interment. Please contact the NHSVC office for information regarding applications for dependent children.
- The person completing the application should sign and date the form. If the veteran or spouse requires assistance, a designated individual may complete and sign the application on their behalf.
- Following approval, a Certificate of Eligibility is mailed within 30 days. If you do not receive your certificate within 30 days, please contact the NHSVC office.

For questions or further information, please call (603) 796-2026. Mail, email, or fax completed application to:

### New Hampshire State Veterans Cemetery

110 Daniel Webster Highway Route 3

Boscawen, NH 03303

Phone: (603) 796-2026 Fax: (603) 796-6300 Email: [info@nhsvc.com](mailto:info@nhsvc.com)

Website: [www.nhsvc.com](http://www.nhsvc.com)

**REMINDER: VETERAN'S DISCHARGE DOCUMENTS MUST ACCOMPANY THIS APPLICATION**