

# St Landry Veterans Funeral Honor Guard Application

Note to applicants: all applications will be subjected to a **rigorous background check** to verify information provided.

Name: \_\_\_\_\_

Home Street Address: \_\_\_\_\_

Home City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Do you have a valid driver's license:  Yes  No State: \_\_\_\_\_ License # \_\_\_\_\_

Education- High School: \_\_\_\_\_

College: \_\_\_\_\_ Major: \_\_\_\_\_

Military Branch:  Air Force  Army  Marines  Navy  Other

Service Dates: \_\_\_\_\_ to \_\_\_\_\_

Are you a member of a veteran's organization in St. Landry Parish?  Yes  NO

If yes, name and location: \_\_\_\_\_

Current Employer: \_\_\_\_\_ Location: \_\_\_\_\_

Days and Hours of Work: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return Application to with a copy of your DD Form 214:

## American Legion Post 514

In Care OF Veterans Funeral Honor Guard Coordinator

648 Thelma Drive

Sunset, LA 70584

(337) 662-7283

