

STATE OF NEBRASKA WWII RECOGNITION MEDAL APPLICATION

Please be sure to complete this form as accurately as possible and with contact information you have access to. We will be following up with more information on this program, such as details on in-person events, using the information provided here. If you have any questions or need to share additional details prior to attending an in-person event, please contact us at 402-471-2458 or ndva@nebraska.gov.

Veteran First Name N	Middle Initial	Last Name	
Date of Birth			
Address			
City	State	Zij	p
Phone	Email		
How would you like to receive your a May 8, 2025, in-person event Local Mayor's Office Shipped to my home	Nam		n behalf of the veteran above.

Send a copy of your DD-214 and this completed form to:

Nebraska Department of Veterans' Affairs

ATTN: WW2 Program

PO Box 95083

Lincoln, NE 68509-5083

