Bill Anoatubby Governor



Department of Community Services / Aging Division

208 West Lillie Boulevard / Madill, OK 73446 / (580) 795-9790 / Fax: (580) 795-9791

# **Chickasaw Annual Elder Veterans Trip**

Army \* Navy \* Air Force \* Marine Corps \* Coast Guard \* National Guard

- A Chickasaw elder veteran is only required to submit one application for the program.
- Chickasaw Elder Veterans Trip is a "thank you" to Chickasaw elder veterans from Governor Anoatubby and the Chickasaw Nation.
- One companion may travel with the Chickasaw elder veteran during the trip. The companion must be at least 21 years of age and able to care for themselves along with the elder veteran. The companion must be a spouse or blood relative of the elder veteran.
- The Chickasaw elder veterans trip to Washington, D.C. is all-expenses paid, including airline ticket, meals, and hotel for the elder veteran and companion.
- The Chickasaw elder veteran and companion must complete a liability and photography release before traveling with the group.
- No alcohol is allowed during the Chickasaw Nation elder events.

### Applicant information:

Name:					
First	Middle		Last		Suffix
Preferred name:	Birth date:		Age:	Gender: 🗆 Male	□ Female
Mailing address:					
Street	City		State		ZIP
Physical address:	City		State		ZIP
Home phone no.: ()		no : (	)		ΖIΓ
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Email address:					
Chickasaw citizenship ID no.:		[	Disabled? 🗆 Yes	□ No	
Do you attend a Chickasaw Nation Sen If yes, indicate your home center: □ Ad □ OKC □ Panola □ Pauls Valley □	a 🗆 Ardmor	e 🗆 Con	nerville 🛛 Dunc		
Military information:					
Branch of service:  Air Force  Arm	ny 🗆 Coast	Guard D	□ Marine Corps	National Guard	□ Navy
Rank at time of discharge:		Statione	d:		
Beginning year of service:		Ending	/ear of service: _		
Served during wartime: □ Yes □ No If yes, where:		Date(s)	served:		
Emergency contact information:					
Name:					
Relationship:	Phone no.: (	)		_	
Email address:					
		Page 1 of 2		Form no. 04762 CS-AG	Pov 1/2024
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## Additional information:

Would you be interested in the following? (check all that apply)

- □ Mentoring
- □ Appearing in promotional pieces such as: commercials, news articles, web page, etc.
- □ Sharing personal story with tribal historians, reporters, etc.
- □ Traveling with other Chickasaw veterans for special events

Do you have any travel limitations:  $\Box$  Yes  $\Box$  No If yes, please list: \_\_\_\_\_

#### Criminal history information:

Do you have a misdemeanor convict	i? □ Yes □ No				
Do you have a felony conviction rega	s 🗆 No				
Have you ever been incarcerated for					
If yes, please list: Department of Corrections no.:					
Conviction date: Rele					

#### Acknowledgment:

By signing this application, I hereby attest that I have disclosed any criminal history, which may prevent me from providing a safe atmosphere for others. Furthermore, I hereby agree that I will submit to a criminal background investigation and provide all information necessary to its completion, if requested.

Applicant signature

Date

Supporting information: (To complete this application, you must supply one of the following.)

- 1. DD214 (active duty) or NGB22 (guard or reserve)
- 2. Retired ID card
- 3. State issued driver's license with veteran logo
- 4. Any official Department of Defense document with service member's name that does not violate law or compromise national security.