

# Suffield Veterans Memorial Expansion Phase 1



The Suffield Veterans Memorial Expansion Committee is seeking applicants for inclusion on the existing memorial dedicated in 2003. The memorial honors Suffield residents who have served in the Armed Services during wartime.

To qualify for recognition on the existing memorial, the following criteria is established:

- Men and women whose principal address was in Town of Suffield when they entered active duty
- Service Branches include Army, Navy, Marine Corps, Air Force and Coast Guard
- Service must have been other than dishonorable.
- Period of service must include sometime during:

- WWI            April 6, 1917 to November 11, 1918
- WWII            December 7, 1941 to December 31, 1946
- Korea            June 27, 1950 to January 31, 1955
- Vietnam        February 28, 1961 to August 4, 1964 (Must have served in the Republic of Vietnam)
- Vietnam        August 5, 1964 to May 7, 1975 (All other cases)
- Persian Gulf    August 2, 1990 to April 11, 1991

*Periods of War per Title 38 United States Code (USC) Veterans Benefits Section 101, as may be amended from time to time, and the Congressional Research Service report RS21405.*

Those who died in service during these periods or, because of that service, will be so designated on the honor roll.

- Notes:
1. United States Citizenship is not required
  2. Specific location or length of service is not a determining factor (except for Vietnam)
  3. Documentation confirming eligibility (DD214 or other if not available) is required
  4. Must be requested by Veteran if living

---

## NOMINATION

Application Date: \_\_\_\_\_

Veteran's Name: \_\_\_\_\_

Veteran's Suffield Address upon entering active duty: \_\_\_\_\_

Present Street Address (if living) \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Active-Duty Date: \_\_\_\_\_ Date Discharged: \_\_\_\_\_ Character of Discharge: \_\_\_\_\_

Branch of Service: \_\_\_\_\_

Died in service or as a result? \_\_\_\_\_

---

Nominator Contact Information, if other than the nominee:

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

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_