



Information Form for Members Seeking a Department of Oklahoma Disabled American Veterans State Office

Please complete and forward to Department Adjutant, 2311 N Central Ave #1000B, Oklahoma City, OK 73105 or Fax 405-557-0252 or email danny@okdav.org (are requested to be received by **May 19, 2017.**)

Name: _____

Address: _____

City: _____ ZIP Code: _____

Cell # _____ Home# _____ Email: _____

Chapter # and Location: _____ Membership # _____

Office/position seeking: _____ Have you previously served the Department? _____

Why are you seeking an office/position with the Department?

Do you attend chapter meetings? _____ How long have you been a DAV member? _____

Are you a current Chapter Officer? ____ Office? _____ Are you active in your chapter? _____

What Chapter offices or positions have you held and when? _____

Are you now employed? _____ If yes, where and what type position: _____



What other Veteran or Civic organizations do you belong to? _____

Have you served as an officer in any of them? ____ If yes, what Office(s) _____

Are you physically able to serve? _____ Are you reasonably free to travel? _____

Please attach a resume if you have one or add any information you desire concerning training, education and experience:

Signature _____

*******CHAPTER ENDORSEMENT*******

Not mandatory

The members of DAV Chapter # _____ recommend that the above candidate be considered for a Department Office as indicated. We will give him/her our full support.

Date: _____

Chapter Commander

Chapter Adjutant