



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

Please complete and forward to Department Adjutant, 14083 S State HWY 51 #112, Coweta, OK 74429 or Fax 888-407-3302 or email [danny@okdav.org](mailto:danny@okdav.org) (should be received by **May 13, 2022.**)

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?

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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

OR

\_\_\_\_\_  
Chapter Adjutant