

State of Missouri Korean Conflict Medallion Program Application Form

Please Type or Print Legibly

- Please mail award.
- Ceremony is requested. (Groups of veterans requesting ceremony please send all applications together and assign a point of contact so we can better assist you in coordinating your ceremony.)

Veteran's Information		
Last Name	First Name	Middle Name or Initial
*Current Street Address	*City	*State and Zip Code
Date of Birth	Home Phone	County

If address was different on 28 August 2003, or if veteran is deceased--check here ___ and complete section 4 on reverse side of form.

Please neatly print the service information that you would prefer on your certificate.		
Service Number	Or Social Security Number	Branch of Service (select one)
Highest Rank or Grade Attained	<input type="checkbox"/> Marine Corps <input type="checkbox"/> Other (please specify) _____ <input type="checkbox"/> Army <input type="checkbox"/> Navy <input type="checkbox"/> Air Force <input type="checkbox"/> Coast Guard	
Dates of Service in Korean War:	_____	

Surviving spouse or eldest living survivor to receive award should eligible veteran be unable to receive award:		
Last Name	First Name	Middle Name or Initial
Street Address	City	State and Zip Code
Relationship	Home Phone	Work Phone
Is veteran deceased?(Circle one) Yes No		

*Veteran or the person authorized to apply for the Veteran Recognition Award **must attach copy of Report of Discharge or Separation from Service or a copy of DD 214 that substantiates record of service.** Other forms of acceptable documentation are listed on the back. Applicant's signature attests that information provided above is correct and separation from service was under honorable conditions. Signature of applicant's other than veteran attests that applicant is the spouse or eldest living survivor, and that the information provided is correct.*

Applicant's Signature _____ Date _____

SEE REVERSE FOR INSTRUCTIONS FOR COMPLETION OF FORM

FOR USE BY THE OFFICE OF THE ADJUTANT GENERAL ONLY

Was the above named veteran:
 On active duty during the period of 27 June 1950 to 31 January 1955? Yes___ No___
 Approved___ Disapproved___ By _____ Date _____
 Reason for Disapproval _____

Instructions for Completion of Korean Medallion Program Application Form

1. Who may apply:

- a. Any veteran who meets the eligibility requirements listed below is entitled to a medallion, medal, and certificate.
- b. Any spouse or eldest living survivor of a veteran who meets the eligibility requirements listed below but died prior to having made application is entitled to a medallion, medal, and certificate.

2. Eligibility Requirements:

- a. Veteran must have served on active duty in the United States military service at any time during the period of June 27, 1950 to January 31, 1955.
- b. Veteran was a legal resident of Missouri on August 28, 2003, that either entered or was discharged from military service, or was a legal resident of this state at the time of his or her death.
- c. Veteran received an honorable discharge, or was in active service in an honorable status at the time of his or her death.
- d. The Korean conflict medallion, medal, and certificate shall be awarded regardless of whether or not such veteran served within the United States or in a foreign country.

3. **Service Information:** Fill out this section as completely as possible and attach copy of Record of Discharge or Separation from Service or Department of Defense Form 214. The Office of the Adjutant General will retain copies forwarded to that office. If Discharge or Report of Separation or DD-214 is not available please provide any other information available to document service.

Some acceptable forms of documentation:

- 1) DD-214
- 2) Discharge Papers
- 3) Induction Papers
- 4) DA form 2-1
- 5) Official documentation of medals received
- 6) Newspaper clippings from that era showing your service
- 7) Membership in VFW, American Legion, DAV, etc. (if entry dates are available)

PLEASE DO NOT SEND ORIGINAL DOCUMENTS. WE CANNOT GUARANTEE THEIR RETURN.

4. If different than current address, list veteran's address on August 28, 2003 or at time of death:

Street Address *City* *State* *Zip*

5. The application with copy of military service documentation must be returned to the following address:

**Office of the Adjutant General
ATTN: KOREAN CONFLICT AWARD
PO Box 1808
2302 Militia Drive
Jefferson City, MO 65102
Toll-free: 1-866-834-3431
Phone: (573) 638-9561
Fax: (573) 638-9566**

If assistance is needed in completing the application, please contact your local Missouri Veterans Commission office toll free 1-866-838-4636.