

Clear form

GREENE-DREHER HISTORICAL SOCIETY—VETERANS HISTORY PROJECT

Veteran Biographical Data Form

The GDHS Veterans History Project includes all veterans who resided in Greene Township, Pike County, and Dreher Township, Wayne County, *or* those who were in service and later moved to these townships, *or* those who attended Greene-Dreher or Southern Wayne High School in Newfoundland.

Name First _____ Middle _____ Last _____

Male Female Birth date ____ / ____ / ____ c. Death date ____ / ____ / ____ c.

Place of birth _____

Veteran's Father _____

Veteran's Mother (maiden name) _____

Veteran's place of residence at time of entry into service _____

Military Service

Branch of service _____

Units and locations of military service:

Highest rank _____ Entry date ____ / ____ / ____ c. Separation date ____ / ____ / ____ c.

Military occupation, specialty or rate _____

War, operation or conflict in which the veteran served

Special duties, highlights or achievements

Was the veteran a prisoner of war? Yes No Unknown _____

Did the veteran sustain combat or service-related injuries? Yes No Unknown

Medals or service awards

Additional comments

Photographs

Do you have a photograph of the veteran? Yes No

If yes, would you be willing to:

- Lend us the original photograph(s) so we can make a professional copy, or
- Scan the photograph (or have it professionally scanned) and send us the image file. (Please send a hi-resolution TIFF, PDF or JPEG, with a minimum of 300 dpi.)

The GDHS Photo Manager will contact you to answer any questions you may have.

Letters & Other Documents

Do you have letters, diaries, documents, articles or other materials related to the veteran? Yes No

If yes, what are they? _____

Would you be willing to let us make copies of some of these materials? Yes No

Please note: The GDHS Veterans History Project would welcome the donation of original documents to our Photographic & Document Archive for long-term preservation and access by researchers.

Person providing the Veteran Biographical Information

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Relationship to veteran _____

Permission to use the Photographs and Biographical Information

As a participant in the GDHS Veterans History Project, I agree that GDHS may retain the information, photographs, documents and other materials that I provide, either originals or copies, for their permanent collection, and that these items may be used for educational purposes, including for publication, exhibition, and presentation in any format. I understand that I do not give up any copyrights that I may hold.

Signature _____ Date _____

Your typed name will suffice as your signature on this document.

<p>If you have any questions about this form please contact Bernadine Lennon gths@att.net 570-857-0882</p>

Thank you for participating in the GDHS Veterans History Project.

Please return to Greene-Dreher Historical Society, P.O. Box 176, Greentown, PA 18426