

REQUEST TO DETERMINE ELIGIBILITY FOR INTERMENT

(Please print or type)

NAME OF VETERAN: _____
FIRST MIDDLE LAST

Address: _____
STREET CITY STATE ZIP CODE

Home phone: _____ Work phone: _____

Email address: _____

Social security number: _____

Service number (if known): _____

Branch of service: _____

Date entered service: _____

Date separated from service: _____

Type of discharge: _____

Date of birth: _____

NAME OF SPOUSE: _____
FIRST MIDDLE LAST

Social security number: _____

Date of birth: _____

Will the spouse be interred with the veteran? Yes No

Is the spouse a veteran? Yes No

Military honors at the time of interment is a benefit and an honor earned by the veteran for honorable service in the United States military. Do you wish to have military honors at this funeral? Yes No N/A

Please note: At the time of burial the family will have a choice of "emblems of belief" and "optional inscription" to be placed on the markers.

PLEASE MAIL OR FAX THIS REQUEST AND A COPY OF MOST RECENT DISCHARGE / SEPARATION FORM DD 214 (DO NOT SEND ORIGINAL) TO THE CEMETERY OF CHOICE FOR INTERMENT:

Northwest Louisiana Veterans Cemetery
7970 Mike Clark Road
Keithville, LA 71047
Ph: 318-925-0612
Fax: 318-925-5521
nlvc@la.gov

Central Louisiana Veterans Cemetery
3348 University Pkwy.
Leesville, LA 71446
Ph: 337-238-6405
Fax: 337-238-6448
clvc@la.gov

Southeast Louisiana Veterans Cemetery
34888 Grantham College Dr.
Slidell, LA 70460
Ph: 985-646-6458
Fax: 985-646-6481
slvc@la.gov

Northeast Louisiana Veterans Cemetery
2413 Hwy 425
Rayville, LA 71269
Ph: 318-728-4346
FAX: 318-728-5921
nelavc@la.gov