World War II Veterans
State of Florida
High School Diploma Application

Eligible dates of military service: September 16, 1940 – December 31, 1946

This application is used to establish the eligibility of honorably discharged WWII Veterans for the receipt of a high school diploma from the State of Florida. The next of kin may apply for the diploma if the Veteran is deceased. Please feel free to include any special comments about this Veteran on a separate page or on the back of this application.

VETERAN INFORMATION - PLEASE TYPE OR PRINT

Veteran's First Name	Veteran's MI	Veteran's Last Name	Suffix (Sr., Jr., etc.)

Veteran's Social Security #	Veteran's Date of Birth Month Day Year	Home Phone of Veteran or Next of Kin ( )_____-_____	Work Phone of Veteran or Next of Kin ( )_____-_____

Veteran's Race (Please circle one)	Veteran's Gender (circle one)	Do we have your permission to use the Veteran's name for program promotional purposes? (circle one)	Is the Veteran deceased?
American Indian or Alaskan Asian or Pacific Islander Black White Other	MALE FEMALE	YES NO	YES NO

If the Veteran is deceased, please indicate your name and relationship to the Veteran. (spouse, child, grandchild, sibling)	Current Mailing Address of Veteran or Next of Kin Submitting Application

VETERAN'S MILITARY SERVICE INFORMATION

Please attach a copy of your DD Form 214.

Branch of Service	Date of Enlistment/Draft Month Day Year	Date of Honorable Discharge Month Day Year	Service Number Highest Rank Achieved

Have you ever applied for VA Benefits?	If yes, please provide your VA Claim Number.
YES NO	

HIGH SCHOOL INFORMATION

What year did the Veteran enroll in high school?	What year did the Veteran leave high school to enter the World War II?	What year would the Veteran have graduated?
19_____	19_____	Class of 19_____

Name of High School Attended	County Where School Was Located	City and State of High School

I certify that all the information provided on this application and the supporting documentation is true and correct to the best of my knowledge and is to be used for the sole purpose of applying for a State of Florida High School Diploma.

_____ _____

Signature of Veteran or Next of Kin Notary Public Date

_____ _____

Date My Commission Expires

FOR OFFICE USE ONLY:
VA Approval_____ Date_____

DOE Approval_____ Date_____

Appl. Rec'd._____ Dip. Iss._____ Dip Mld._____

PLEASE MAIL TO:

Florida Department of Education
World War II High School Diploma Program
325 West Gaines Street, Room 714
Tallahassee, Florida 32399-0400
Attn: Gayle Manley