NEWFOUNDLAND VOLUNTEER WAR SERVICE MEDAL
MERCHANT NAVY APPLICATION FORM

TO BE COMPLETED AND SENT TO: VETERANS AFFAIRS CANADA
Merchant Navy Registry
Honours and Awards Clerk
66 Slater Street
Ottawa ON K1A 0P4
PHONE: 1-613-992-3948 1-800-995-5003
FAX: 1-613-947-3844

APPLICANT’S NAME ________________________________________________________________

RELATIONSHIP TO VETERAN ______________________________________________________
(if application not made by Veteran but by relative)

ADDRESS __________________________________________________ POSTAL CODE________

VETERAN’S NAME ____________________ SERVICE NO ________________

BRANCH OF SERVICE __________________________________________________________

THEATRE OF SERVICE ____________________ YEARS OF SERVICE __________

MEDALS ALREADY HELD ______________________________________________________

Is Veteran eligible for or has he received a volunteer service medal from any other country _____

Was Veteran domiciled in what is now the Province of Newfoundland prior to his enlistment in the British
Imperial Forces? ________________________________________________________________

I HEREBY CERTIFY that the information given in this application form is true, correct and complete in every
respect.

_________________________________________ ________________________________
Date Signature of Applicant

NOTE: If application made by a relative of a deceased Veteran, a Statutory Declaration (Form B) must
accompany application.

For Completion by Department of Veterans Affairs
Service verified ____________________________ Medal Number Assigned ________________
Signature___________________________________ Date Distributed _________________________
Date ________________________________