

Wisconsin State Genealogical Society
Military Certificate Application

Please print legibly when completing the application. Allow 6-8 weeks for processing.

Check one please: **Direct** **Collateral** Picture Included **Yes** **No**

Check which certificate you are applying for: **Beaver Wars** **French & Indian War**

Revolutionary War **War of 1812** **Winnebago War** **Black Hawk War**

Mexican War **Civil War** **Spanish-American War** **WWI**

WWII **Korean War** **Vietnam War**

Date of application _____

Name of Applicant _____

Address _____

E-mail _____ Phone Number _____

Is applicant a member of the Wisconsin State Genealogical Society? Yes No

To whom is the certificate to be issued? (Please enter name as it is to appear on the certificate)

Name _____

Address _____

To whom is the certificate to be mailed? Applicant Person to whom issued

Veteran's Name: _____

Dates served _____ Documentation # _____

Military Unit served in _____ Documentation # _____

Dates served in Wisconsin Unit _____ Documentation # _____

Date and County of residence in Wisconsin _____ Documentation # _____

Date and County of Burial in Wisconsin _____ Documentation # _____

I understand that submission of this application grants the Wisconsin State Genealogical Society permission to publish genealogical data contained herein and my name and contact information in a printed or online index, and to release copies of the application to genealogical researchers. I understand that if applications are sent out to genealogical researchers that personal information of living individuals at the time of submission of the application will be deleted. Personal Information includes date of birth and marriage along with place of birth and marriage. Signature on the application will also be deleted.

Applicant's Signature _____ Date _____

1. Applicant:

	Name	Date/Place of Birth (city/county/state)	Date/Place of Marriage (city/county/state)	Name of Spouse (use maiden name when appropriate)	Spouse's Birthdate/ Place of Birth (city/county/state)
Documentation for each column	#____	#____	#____	#____	#____

2. Children of Applicant: (attach additional sheet if more children)

Name	Date/Place of Birth (city/county/state)	Date/Place of Marriage (city/county/state)	Name of Spouse (use maiden name when appropriate)	Spouse's Birthdate/ Place of Birth (city/county/state)

3. Parents of Applicant:

	Name	Date/Place of Birth (city/county/state)	Date/Place of Marriage (city/county/state)	Date/Place of Death (city/county/state)
Father				
Father's Documentation for each column	#____	#____		#____
Mother (include maiden name if known)				
Mother's Documentation for each column	#____	#____	#____	#____

4. The above said Parent (_____) in Military Ancestor's Line is the child of:

List Name

	Name	Date/Place of Birth (city/county/state)	Date/Place of Marriage (city/county/state)	Date/Place of Death (city/county/state)
Father				
Father's Documentation for each column	#____	#____		#____
Mother (include maiden name if known)				
Mother's Documentation for each column	#____	#____	#____	#____

5. The above said Parent (_____) in Military Ancestor's Line is the child of:

List Name

	Name	Date/Place of Birth (city/county/state)	Date/Place of Marriage (city/county/state)	Date/Place of Death (city/county/state)
Father				
Father's Documentation for each column	#____	#____		#____
Mother (include maiden name if known)				
Mother's Documentation for each column	#____	#____	#____	#____

6. The above said Parent (_____) in Military Ancestor's Line is the child of:

List Name

	Name	Date/Place of Birth (city/county/state)	Date/Place of Marriage (city/county/state)	Date/Place of Death (city/county/state)
Father				
Father's Documentation for each column	#____	#____		#____
Mother (include maiden name if known)				
Mother's Documentation for each column	#____	#____	#____	#____

7. The above said Parent (_____) in Military Ancestor's Line is the child of:

List Name

	Name	Date/Place of Birth (city/county/state)	Date/Place of Marriage (city/county/state)	Date/Place of Death (city/county/state)
Father				
Father's Documentation for each column	#____	#____		#____
Mother (include maiden name if known)				
Mother's Documentation for each column	#____	#____	#____	#____

8. My Military Ancestor:

	Name	Date/Place of Birth (city/county/state)	Date/Place of Marriage (city/county/state)	Name of Spouse (use maiden name when appropriate)	Spouse's Birthdate/ Place of Birth (city/county/state)
Documentation for each column	#_____	#_____	#_____	#_____	#_____

9. Children of Military Ancestor: (attach additional sheet if more children)

Name	Date/Place of Birth (city/county/state)	Date/Place of Marriage (city/county/state)	Name of Spouse (use maiden name when appropriate)	Spouse's Birthdate/ Place of Birth (city/county/state)

Documentation for above listed children: _____

10. The Parents of Military Ancestor:

	Name	Date/Place of Birth (city/county/state)	Date/Place of Marriage (city/county/state)	Date/Place of Death (city/county/state)
Father				
Father's Documentation for each column	#____	#____		#____
Mother (include maiden name if known)				
Mother's Documentation for each column	#____	#____	#____	#____

11. Siblings of Military Ancestor: (attach additional sheet if more children)

Name	Date/Place of Birth (city/county/state)	Date/Place of Marriage (city/county/state)	Name of Spouse (use maiden name when appropriate)	Spouse's Birthdate/ Place of Birth (city/county/state)

Documentation for above listed children:
