APPLICATION
(For use of this form, see DMNA Reg 672-1. Proponent is MNP-AWD)

SECTION I
PERSONAL DATA

From: _____
(FIRST NAME) (MIDDLE INITIAL) (LAST NAME)

Full mailing address: _____

_____

Phone number / e-mail address: _____

Branch of service: _____

Please place a check mark alongside of the award(s) you are requesting.

- ☐ NEW YORK STATE KOREAN WAR COMMEMORATIVE MEDAL
- ☐ NEW YORK STATE VIETNAM WAR COMMEMORATIVE MEDAL
- ☐ NEW YORK STATE IRAQ WAR COMMEMORATIVE MEDAL
- ☐ NEW YORK STATE AFGHANISTAN WAR COMMEMORATIVE MEDAL

This is to certify I have reviewed the eligibility criteria for the award I am requesting. I am forwarding herewith substantive documentation to support this request. Attached is a copy of Report of Separation from Active Duty (i.e. NGB-22, DD Form 214, etc.). This documentation will include my Honorable Discharge, list of awards or certificates or permanent orders for awards and will indicate current New York State citizenship while serving on federal active duty.

Signature of Applicant or Posthumously Requested by

MAIL TO: The Adjutant General
Division of Military and Naval Affairs, **ATTN: MNP-AWD**
330 Old Niskayuna Road
Latham New York 12110-3514

DMNA Form 106A-R
(04 December 2024)

***Privacy Act and NY State Personal Privacy Protection Law information. See DMNA Reg 672-1 for details**