

## UNITED STATES VETERANS SERVICE OFFICER CORPS (U.S. VSOC)

## Volunteer Application Form

Full Name:
Mailing Address:
Phone Number:
Email Address:
Date of Birth (MM/DD/YYYY):
Branch of Service:
MOS and Job Title:
Years Served:
Honorable Discharge (Y/N)
Special Skills / Certifications (e.g., EMT, Nursing, Graphic Design, etc.):
If selected to join, do you understand that you are required to adhere to the U.S. VSOC Uniform Standard? $(Y/N)$ :
Do you understand that you are responsible for acquiring your own uniform, and the U.S. VSOC only provides the U.S. VSOC branch tape and patch? (Y/N):
If selected to join, do you understand that dues are required monthly at a rate of \$10 per month made payable to the U.S. VSOC at the Commander's discretion? $(Y/N)$ :
Signature:
Date: