



**Household Veterans Status Form
Executive Order No. 65**

1. Your Agency Name

2. Your Full Name

3. Have you or anyone in your household served in the United States Military?
If yes, please continue answering the questions below.

Yes

No

4. Are you a Veteran?

Yes

No

5. Is your Spouse/Partner a Veteran?

Yes

No

6. Is your Child living within your household a Veteran?

Yes

No

7. Are there Others living within your household a veteran?

Yes

Please indicate:

No