



ELIGIBILITY APPLICATION For WisDOT VETERAN IDENTIFIER

The provision of your social security number is mandatory under the Wisconsin Statutes. Your social security number will be used to verify your identity. If you do not provide your social security number, processing may be delayed.

Completion of this application will result in the certification of veteran status for inclusion of the *VETERAN* identifier on your State of Wisconsin driver's license or identification card, assuming all eligibility criteria are met.

Please include the DD214/DD215, your discharge document, with this completed form.

Veteran's Name: _____
First Middle Last

Veteran's Address: _____
Street City State Zip Code County

Update my address on file with the above address.

Phone Number: _____
Phone Number, include area code and extension Phone Number, include area code and extension

Veteran's Social Security Number: _____ *(required to verify your identification)*

Veteran's Date of Birth: _____

How do you want to receive correspondence relating to this eligibility request?

Send to above address

Send to this email address: _____
(faster response by email)

Under penalties of law, I declare that the above information is true, correct and complete, to the best of my knowledge.

Veteran's Signature

Date