



Texas State Veterans Cemetery
Pre-Registration Form

Central Texas State Veterans Cemetery
11463 State Highway 195
Killeen, Texas 76542-4945
Phone: 254-616-1770
Fax: 254-616-1769

Texas State Veterans Cemetery at Abilene
7457 W. Lake Road
Abilene, Texas 79601
Phone: 325-673-4446
Fax: 325-673-4448

Rio Grande Valley State Veterans Cemetery
2520 S. Inspiration Road
Mission, Texas 78572
Phone: 956-583-7227
Fax: 956-583-7887

Coastal Bend State Veterans Cemetery
9974 IH37 Access Road
Corpus Christi, Texas 78410-1408
Phone: 361-248-4830
Fax: 361-248-4965

Please mail/fax to the appropriate cemetery.

VETERAN APPLICANT PERSONAL INFORMATION

Form section for Veteran Applicant Personal Information including fields for Last Name, First Name, Middle Name, Present Street Address, City, County, State, Zip, Home Phone, Work Phone, Date of Birth, Social Security Number, Gender, Marital Status, and Service Type Expected.

SPOUSE/FAMILY MEMBER PERSONAL INFORMATION (Complete only if pre-registering spouse)

Form section for Spouse/Family Member Personal Information including fields for Last Name, First Name, Middle Name, Present Street Address, City, County, State, Zip, Home Phone, Work Phone, Date of Birth, Social Security Number, Gender, Marital Status, and Service Type Expected.

VETERAN'S MILITARY SERVICE INFORMATION

Form section for Veteran's Military Service Information including fields for Branch of service, Period of Service, Service/Social Security Number, and Highest Rank Attained.

PERIODS OF ACTIVE DUTY MILITARY SERVICE (If more than 4 active duty periods, enter the longest)

Table with 4 columns: Period Entry Date, Separation Date, Period Entry Date, Separation Date. Rows for 1st, 2nd, 3rd, and 4th periods.

I certify that all information I have provided on this application and the supporting documentation is true and correct to the best of my knowledge.

SIGNATURE OF APPLICANT: _____

THIS PORTION TO BE COMPLETED BY CEMETERY PERSONNEL:

Form section for Cemetery Personnel completion including fields for NAME, TITLE, DATE, APPLICATION IS (Approved/Denied), and Reason.