Connecticut Department of Veterans' Affairs
VET EXPRESS REQUEST FORM

Thank you for your interest in having the VET EXPRESS participate in your event. This mobile veterans' outreach office is equipped to help veterans apply for state and federal benefits they have earned. Please fill out this form as completely as possible, including any additional information you feel may be of assistance, and submit it at least 30 days prior to your event to:

Director of OA&A
CT Department of Veterans' Affairs
287 West Street,
Rocky Hill, CT 06067
FAX: 860-721-5895 or email donna.meskony@po.state.ct.us

We will make every attempt to accommodate your request, but we cannot guarantee approval due to the popularity of the VETS EXPRESS visits across the state.

Date of Event:_____**Expected No. of Veterans:**_____

Name/Type of Event:_____

Sponsor:_____

Starting Time:_____**Ending Time:**_____

Location/Street Address of Event:_____

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It is important that we have a contact person/coordinator from your organization available to us on the day of the event. This will enable our staff to inform you of any traffic delays or other circumstances that may affect the success of your event.

Contact Person:_____

Phone Number/Cell Phone Number:_____

Fax Number:_____Email:_____

Do you have an area of particular interest regarding veterans' benefits? _____

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Additional Information or Instructions:_____

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