



DVMF Veteran Cemetery Program Pre-application For Interment

Instructions

- 1) **Fully complete and sign** this form.
- 2) Provide military discharge information
 - a. **Veterans** provide a **copy** of your DD214 or equivalent discharge document that includes **DATE OF ENTRY & SEPARATION, BRANCH OF SERVICE, SERVICE NUMBER, HOME OF RECORD AT TIME OF ENTRY, and CHARACTER OF SERVICE**
 - b. **Reservists** provide a copy of your Active Duty Training DD214 **and** discharge memo showing successful completion of your service obligation
 - c. **National Guard members** provide a copy of your NGB-22 showing successful completion of your service obligation
- 3) Provide Maryland residency documentation
 - a. **Veterans** are not subject to a Maryland residency requirement, and are exempt from providing residency documentation
 - b. **Reservists & National Guard members** should provide documentation of proof of Maryland residency, which can include a Maryland address in the Home of Record field on your discharge document or a utility bill, hospital bill, tax records, or a copy of a valid Maryland driver's license
- 4) Mail or email your completed and signed form, copy of discharge document(s), and Maryland residency documentation (if required) to your cemetery of choice. Please allow 4-6 weeks for processing.

Note: Submitting an incomplete form or omitting any supporting documentation will lead to delay or denial of your pre-application. Please notify the cemetery in writing if any information changes after you receive notification of DVMF's acceptance of your pre-application. Additional documentation may be required prior to establishing initial and/or final eligibility for (but not limited to) spouses, dependent children, name changes post-discharge, and individuals who live outside of Maryland at the time of death.

Special Note for Reservists & National Guard members: Reservists and National Guard members will be subject to a burial fee, payable on the day of interment. The amount will be equal to the burial plot allowance provided by the U.S. Department of Veterans Affairs for the burial of a veteran in a State Veterans' Cemetery. The amount is subject to change annually.

Cheltenham Veterans Cemetery

11301 Crain Highway
Cheltenham, MD 20623
Phone: 1-301-372-6398
Fax: 1-301-782-7310

cheltenham.vc@maryland.gov

Crownsville Veterans Cemetery

1122 Sunrise Beach Road
Crownsville, MD 21032
Phone: 1-410-987-6320
Fax: 1-410-987-3920

crownsville.vc@maryland.gov

Eastern Shore Veterans Cemetery

6827 East New Market Ellwood Road
Hurlock, MD 21643
Phone: 1-410-943-3420
Fax: 1-410-943-3680

easternshore.vc@maryland.gov

Garrison Forest Veterans Cemetery

11501 Garrison Forest Road
Owings Mills, MD 21117
Phone: 1-410-363-6090
Fax: 1-410-363-1533

garrisonforest.vc@maryland.gov

Rocky Gap Veterans Cemetery

14205 Pleasant Valley Road North East
Flintstone, MD 21530
Phone: 1-301-777-2185
Fax : 1-301-777-2402

rockygap.vc@maryland.gov

General Information

DVMF Cemetery & Memorial Programs
1-410-923-6981

veterans.maryland.gov/cemetery-and-memorial-program

Privacy Act Notice: The information requested on this form is required to supplement military service information submitted by the applicant. The information may be disclosed only as permitted by law.



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Full Name of Service Member _____

Social Security # _____ Service Member's Daytime Phone _____

Service Member's Date of Birth _____ Service Member's Place of Birth _____

Service Member's Email Address _____

Service Member's Current Home Address (Incl City, State, & Zip Code) _____

Full Name of Next of Kin _____

Next of Kin's Daytime Phone _____

Next of Kin's Current Home Address (Incl City, State & Zip Code) _____

Veteran's Marital Status (choose one) Married _____ Divorced _____ Never Married _____ Widowed _____

If married, please include a copy of the marriage license and provide your spouse's information below.

Full Name of Spouse _____

Spouse's Daytime Phone _____

Spouse's Current Home Address (Incl City, State & Zip Code) _____

If widowed, please provide your spouse's name and burial location on the line below.

****Please Read and Sign Below****

I hereby apply for a pre-determination of my eligibility for interment in a Maryland State Veterans Cemetery. I understand that acceptance of this application by DVMF does not constitute a final determination that I, or any of my family members, are eligible for interment in a Maryland State Veterans Cemetery or guarantee the reservation of a specific gravesite. **I understand that the DVMF reserves the right to make a final determination at the time of death regarding whether I meet the legally required eligibility criteria for burial in a Maryland State Veterans Cemetery and agree to update my information, in writing, as necessary.**

Signature of Veteran _____ Date _____

Would you like to receive the Department's bi-weekly email newsletter? _____ Yes _____ No

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