

# Voices for Veterans West End Stand Down May 7, 2009

**Welcome to the Voices for Veterans Stand Down.** For safety and comfort of all please note: **NO DRUGS** or **ALCOHOL** are permitted at the stand down. **NO WEAPONS** of any type are allowed and **NO SMOKING**.

**The following information is strictly voluntary.** We will only use it to help maintain the funding for Stand Downs in the future.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_  
DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Male 73 Female 15.

**Please check all that apply:** I am a Veteran 58 Dependent of Veteran 11  
Survivor of Veteran 15 Active Military 5 Volunteer 25.  
I am not a Veteran 6.

County and or State of current or last permanent address: \_\_\_\_\_

Contact information: (tel.) \_\_\_\_\_ (email) \_\_\_\_\_  
Address \_\_\_\_\_

**Services interested in:** Veteran's Benefits 19 Veteran's ID/Status 7.  
Medical Benefits 14 Health Screening 9 Employment Services 7 Housing 8.  
Utilities Assistance 9 Legal Assistance 4 Dental Screen 10.  
Senior Information/Social Security 10 Homeless Assistance 6.  
Transportation Assistance 6 Clothing 6.

**Are you currently receiving any veteran's benefits?** Yes 25 No 29.

**Are you Homeless?** Yes 22 No 48 If yes, for how long \*Homeless in Past 4.  
Homeless not receiving VA benefits 3 Homeless with VA benefits 6.

**\*Three reported 9 mos one reported 2 years and one reported 3 years**