

AD 807 Revised Oct 2010

Australian Government

Department of Defence

Application for the Issue of Medals and/or Clasps

Office use only

,	
Name	Date of acknowledgement
Application number	Bar code number

- Please use BLOCK LETTERS only
- Note: If medals have already been issued, and the recipient is now deceased, the medals cannot be reissued.
 Attach a seperate piece of paper to this application if you require more space to answer any of the questions.

Personal details

Family name	Given names (In full)
Title (Mr, Mrs, Ms etc)	Date of birth
Family name served under (If different from above)	Given names served under (If different from above)

Contact details

Address	Suburb	State	Post code
Email	Telephone number(s)		

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Service or PMKeyS number (If	known)		
Type of service (Tick all that appl	y)		
Navy Army	RAAF National service	Merchant Navy	Qantas
Date of enlistment	Date of discharge	Branch of service	Permanent or reserve
Commission date (If applicable)			
Do you have overseas service? Yes No	,		
▼	country and give the approximate	dates.	
Со	untry	From	То

Awards details

Awards requested (If known) and any other information in support of the application

Privacy note

The Department of Defence complies with the Information Privacy Principals of the <u>Privacy Act (1988)</u> in the collection, storage, handling, use and disclosure of personal information.

This information is being collected for the purpose of assessing your application for a medal or award. Medals and awards are conferred in accordance with executive instruments of the Crown.

Authorisation and declaration

I authorise Australian Government departments, agencies and other organisations and individuals to disclose to the Department of Defence any personal information required to process this application.

I acknowledge that the Department of Defence may disclose this personal information to the office of the Governor-General for approval of the awards and/or to the offices of Federal Members of Parliament for the presentation of awards.

I authorise the Department of Defence to obtain information about the acceptance of liability for an injury, illness or disease from the Department of Veterans' Affairs under the <u>Veterans' Entitlement Act (1986)</u>, the <u>Safety, Rehabilitation and Compensation</u> <u>Act (1988)</u> and the <u>Military Rehabilitation and Compensation Act (2004)</u>.

I declare that the information I have given on this form is correct.

I understand that there are penalties for deliberately giving false or misleading information.

Signature	Printed name	Date

Return this application to:

Defence Honours and Awards PO Box 7952 CANBERRA BC ACT 2610