

APPLICATION FOR ARCTIC EMBLEM - QUESTIONNAIRE

PLEASE COMPLETE THE FOLLOWING DETAILS IN **BLOCK CAPITALS**

- 1. SURNAME
- 2. FORENAMES (not initials)
- 3. SERVICE NUMBER RANK
- 4. DATE OF BIRTH DATE OF DEATH (if applicable).....
- 5. NAME OF SHIP/FORMATION ON ENLISTMENT AND DATE
.....
- 6. NAME OF SHIP/FORMATION ON DISCHARGE AND DATE
.....
- 7. RANK HELD ON DISCHARGE
- 8. DETAILS OF SERVICE IN ARCTIC REGIONS:
SHIPS, LOCATION(S), FORMATIONS ETC. AS APPROPRIATE PLUS APPROXIMATE DATES
AND CONVOY DESIGNATIONS (IF KNOWN):
.....
.....
.....
.....
- 9. FULL ADDRESS OF APPLICANT, PLUS COUNTRY IF NON UK RESIDENT:
.....
.....
..... POST CODE:.....
- 10. TELEPHONE NUMBER:
- 11. IF YOU ARE CLAIMING AS NEXT OF KIN STATE RELATIONSHIP & NAME:
.....

12. WHEN COMPLETED PLEASE RETURN TO THE MINISTRY OF DEFENCE MEDAL OFFICE AT THE ADDRESS BELOW. PLEASE MARK YOUR ENVELOPE "ARCTIC EMBLEM"

MoD Medal Office
Innsworth House
Imjin Barracks
Gloucester
GL3 1HW

If you have any supporting documentation, e.g. official Record of Service, please attach copies, (not the originals) which will assist us in determining eligibility to receive the Arctic Emblem.