REPUBLIQUE FRANCAISE

MINISTERE DES AFFAIRES ETRANGERES

PROPOSAL MEMORY

For the rank of "Chevalier" of the Legion of Honor

LAST NAME:								
First name(s):			N	Middle name/initial:.				
Date of birth:			(City/State/Zip:				
Country of birth:			Nati	lationality:				
Social Security N°:								
Current Address:								
City: State/Zip:				Country:				
Tel.:			C	Cell.:				
Fax:			E	Email:				
Current professional status:								
Professional occupation (before retirement, when applying):								
Military Career during the Second World War:								
Incorporation date :		Separation date			To the:			
(1) During peace time	From the:				To the:			
(2) During war time	From the:				To the:			
(3) Services in the	From the:				To the:			
resistance:								
(4) Civil services in the Army: Attributions:								
	From the:				To the:			
Total duration of Services (1+2+3+4)					years	months		
Military Services Bonus					years	months		
French official decorations already bestowed (when applying):								
American and Foreign official decorations / citations bestowed (when applying):								
, o da								

Chronological progress of your professional career:
Education/University/College degrees:
Elective functions, missions in France and abroad:
Services to the community, activities in the social field, community services,
Works and publications:
Military facts and details related to the Second World War
military rades and decarrs refaced to the decond north mar
Last rank obtained :
Military, unit perimed to
Military unit assigned to:
Military occupational specialty:
Wound(s) received in action ?: Yes □ (details)No□
Duration and place of captivity as Prisoner of War (when applying)?
Name and address/tel. of 2 (two) character references:

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Chronological progress of your military career during the Second World War:	
•••••••••••••••••••••••••••••••••••••••	
	•
Battles and campaigns in France:	
Specific heroic actions, participation in battles/combat/missions, during the	
Second World War, (Please give accurate details)	
List of documents enclosed with application form (at the convenience of the applicant)

Please send this document back to: Mrs. Virginie MATHIEN, Consulat Général de France, Lenox Building, Suite 500, 3399 Peachtree Rd NE, ATLANTA, GA 30326