



## APPLICATION

### Acknowledgement:

Your application is meant to provide a demographic and factual history of your service, life story and current situation. It is also meant to highlight who you are and your passion for motorcycling. In your absence, it serves to speak for you and should be completed with integrity, honesty and accuracy.

**For this specific Spring 2018 gifting, the chosen Veteran will receive the title to a Pre-owned 1998 Harley-Davidson Electra Glide, along with a Harley-Davidson Side Car. A picture is available on our website. This Bike is being gifted “as is” and has gone through safety inspection and, we believe, is up to satisfactory sale and riding requirements. Any additional accessories, upgrades or modifications will be the responsibility of the Veteran recipient. Although the side car is removable, it is our expectation that you are applying for this bike because you require the additional stability to ride. You are consenting to our terms preventing sale for personal gain within our established 5 year period.**

**In the event you are selected, you MUST be available to receive this Bike on Saturday, May 5 in Madison, WI. Your inability to be present will affect your receipt of this gift. Personal instruction in riding with a side car has been made available to you on Friday, May 4, 2018 at Harley-Davidson of Madison, if desired.**

### Instruction:

In order for you to have a clear understanding of our criteria and process, it is important you review our website page “Application & Selection”, and click on the PDF Document: *Application Process* prior to completing the application itself.

**The Application, Consent and Waiver must be printed off from each of the PDF links found on our website.** The three documents are to be manually completed in ink and signed. Print legibly and within the space provided. All areas are considered required information, unless non-applicable, and subject to verification.

To assist in our review, *photocopies* of the following supporting documentation is required:

- \*Current Veteran Identification
- \*Every Discharge Document Form DD 214 #4, as applicable
- \*Medical documentation of specific service-connected injury/disease/disability diagnosis(es)
- \*V.A. documentation reflecting disability percentages & monthly allowance, if applicable
- \*Current Wisconsin Drivers and Motorcyclist Licenses
- \*Most recent W-2

A checklist to assist your submission follows the application. All required components of the application process *must be received with a postmarked date no later than **March, 31, 2018.*** Late arrivals will not be considered.

Approval:

I have read the application statements and process, agree, and will submit an accurate reflection of my military and personal life. I understand that the failure to provide all required components and documents may eliminate my application from the review process.

I also understand I am applying for a specific, preowned Harley-Davidson Electra Glide with Side Car and accept it's gifting condition "as is". I am available to attend the scheduled gifting event on May 5, 2018 in Madison, WI.

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Applicant Printed Name

Signature

Date

## A VETERAN & RESIDENCY

Application Completed by: **Myself, The Veteran** or **Another on Veteran's Behalf *and with Their Involvement***  
**(Nominator Must Also Complete Section B)**

1	Last Name:	First Name:	M.I.
2	Date of Birth:	Place of Birth:	Age: Sex:
3	Maiden/Former Name:		
4	Marital Status (circle one):    single    married    divorced    widowed		
	Spouse/Significant Other (if applicable)		Their Phone Contact:
	Closest Local Contact (if no spouse)		Their Phone Contact:
5	<b>Email Address:</b>		
6	Children's Names & Ages:		
7	Occupation:		
	<b>For the below, list non-base/stationed residences for yourself/family while serving to show WI residence history</b>		
8	<b>Current Address:</b>		
	<b>City:</b>	<b>Zip Code:</b>	
	<b>Number of years at this address:</b>	<b>Own</b>	<b>or</b> <b>Rent</b>
	<b>Phone: H:</b>	<b>Cell:</b>	
9	Prior Address:		
	City:	Zip Code:	
	Number of years at this address:	Own	or    Rent
10	Prior Address:		
	City:	Zip Code:	
	Number of years at this address:	Own	or    Rent
11	Prior Address:		
	City:	Zip Code:	
	Number of years at this address:	Own	or    Rent
12	Number of years as a Wisconsin resident BEFORE joining the Service?		
13	Total number of years as a Wisconsin resident?		
14	There is NO history of a criminal record:    Yes, I agree    or    No, with explanation:		

**B NOMINATOR'S INFORMATION, if applicable**

(Veteran's completing this on their own behalf may skip to Section C)

15	Last Name:	First Name:	M.I.
16	Address:		
	City:	State:	Zip Code:
17	Phone:	Email:	
18	Relationship to Veteran:	Years Known:	
19	Why are you nominating this Veteran?		

**C SERVICE INFORMATION**

20	Service Number:	Date Entered Service:
	<b>Complete the applicable section:</b>	
21	<b>U.S. ARMED SERVICES BRANCH</b> (circle one):	<b>Air Force    Army    Coast Guard    Marines    Navy</b>
a	Beginning Grade/Rank/Title:	
b	Dates/Locations of Tours of Duty:	

c	Specialized Training/Education:				
d	Date Separated from Active Duty:			Total Years in Service:	
e	Separation Grade/Rank/Title:			Total # Promotions:	
f	Type of Discharge:				
g	Reason for Separation:				
h	Join the Reserves or Guard? No or Yes (complete below applicable section)				Date Entered:
22	<b>RESERVES</b> Veteran Status (circle one):	<b>Air Force</b>	<b>Army</b>	<b>Coast Guard</b>	<b>Marines</b> <b>Navy</b>
a	Beginning Grade/Rank/Title:				
b	Dates/Locations of Deployment:				
c	Specialized Training/Education:				
d	Total Years in Service:		Total # Promotions:		Date of Separation:
e	Rank at Separation:				
23	<b>NATIONAL GUARD</b> Veteran Status (circle one):	<b>Air</b>	<b>Army</b>		
a	Beginning Grade/Rank/Title:				
b	Dates/Locations of Deployment:				
c	Specialized Training/Education:				

d	Total Years in Service:	Total # Promotions:	Date of Separation:			
e	Rank at Separation:					
24	<b>MERCHANT MARINE</b> Veteran Status					
a	Beginning Grade/Rank/Title:					
b	Dates/Locations of Deployment in War:					
c	Specialized Training/Education:					
d	Total Years in Service:	Total # Promotions:	Date of Separation:			
e	Rank at Separation:					
<b>All applicants complete the following:</b>						
25	Combat Service (circle applicable):	Viet Nam	Post Viet-Nam	Persian Gulf	Afghanistan	Iraq
	Other:					
26	Dates/Locations of Combat Service:					
27	Assignment/Role during combat:					
28	Were you ever a Prisoner of War?	No	Yes	Dates & location of captivity:		
29	List any service citations, medals, awards and other recognition received while in Service:					

## D SERVICE-CONNECTED MENTAL/PHYSICAL INJURY SUSTAINED & LIFE IMPACT

30	Date & Location of injury:
31	Describe how your injuries were incurred, the injuries themselves and your resulting service-connected diagnoses:
32	Describe your current injury/health status, the existence of continuing side-effects, if any, and their impact on your life:
33	VA Disability Rating?    No    Yes    Percentage/Type:
34	Are you physically capable of safely riding and managing a 2-wheel motorcycle?    Yes    No    If no, what accommodations might you need?

## E EMPLOYMENT & FINANCIAL INFORMATION

35	Income:    Single Family    or    Multiple		Number of Dependents:		
36	Annual Household Income (circle one):	<\$40,000	\$41,000 - \$60,000	\$61,000 - \$80,000	
		\$81,000 - \$100,000	\$101,000 - \$125,000	\$126,000 - \$150,000	>\$151,000
	VA Monthly Disability Allowance:	or N/A	Monthly Social Security Allowance:	or N/A	
	Other Income Source(s):				

37	Employer(s) for the past 10 years:
	1. Name & Location:
	Dates Employed: Position:
	2. Name & Location:
	Dates Employed: Position:
	3. Name & Location:
	Dates Employed: Position:
	4. Name & Location:
	Dates Employed: Position:

38	Describe any financial hardship currently preventing you from owning a motorcycle:

**F MOTORCYCLE OWNERSHIP & ENTHUSIASM HISTORY**

39	Current WI Motorcycle License:    Yes    No    #Years with a Motorcycle License?
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40	Currently own a motorcycle?    Yes    No    Year, Make & Model:
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41	List all previous motorcycles owned, including Year, Make & Model for each:

42	List memberships/participation in motorcycle clubs, groups, events or other affiliations, including the years involved:

43	How is motorcycling important to you?



## G COMMUNITY CONTRIBUTIONS

44 List any work/career achievements since becoming a Veteran:

45 List any community involvement/volunteer activities since becoming a Veteran:

46 List (3) Character/Personal References who can speak about you and your need to get back on the road:

a	Name:	Phone:	Relationship:
b	Name:	Phone:	Relationship:
c	Name:	Phone:	Relationship:

**H ESSAY: In the space below, tell us your story and how receiving a Harley-Davidson would impact you (or the Veteran nominated).**







## CHECKLIST FOR APPLICATION SUBMISSION:

\_\_\_\_\_ Entire **Application** printed off, completed legibly, in full, and in ink, with signatures on pages 2 and 11.

\_\_\_\_\_ **Photocopies** of each of the following:

- 1) Wisconsin Veteran Identification
- 2) Every Discharge Document Form DD 214, #4, as applicable to your service career
- 3) Medical Documentation of specific service-connected injury/disease/disability diagnosis(es)
- 4) V.A. documentation reflecting disability percentages & allowance, if applicable
- 5) Current Wisconsin Drivers and Motorcyclist Licenses
- 6) Most recent W2 (or other appropriate Income Tax Form)

\_\_\_\_\_ **Consent Form** printed off from website and signed

\_\_\_\_\_ **Waiver/Release of Liability Form** printed off from website and signed

\_\_\_\_\_ Send the above to us, **postmarked by March 31, 2018**, addressed to:  
Hogs For Heroes, Inc.  
822 Ondossagon Way  
Madison, Wisconsin 53719

\_\_\_\_\_ **Put MAY 5, 2018 in Madison, WI on your calendar in the event your are selected you must be present to receive this gift. Consider May 4, 2018 afternoon tutorial offering at Harley-Davidson of Madison.**

\_\_\_\_\_ **Reminder: NEW IN 2018! Qualified and complete applications will be active and considered for any gifting we offer in 2018. We will notify you electronically each time. You will need to submit a new application for consideration in 2019.**

**Thank you.**

**If your application goes no further than our review process, please know it was our honor to learn more about you. We are grateful to you, and your family, for the service you provided our country and the many sacrifices you made in doing so. We think you are heroic and wish you the best.**

**Peace,  
Kevin & Audra and Craig & Michelle Thompson  
...and a whole slew of others who showed their appreciation for the actions  
of our Veterans and donated to this cause.**