

**ACTION REQUIRED****PLEASE EMAIL THIS****COMPLETED FORM TO:****HQ Military Order of World Wars****Chief of Staff (MOWW/CS)****435 North Lee Street | Alexandria, VA 22314-2301****✘ SUSPENSE — AS COMPLETED ✘**

Guidance: Please refer to the MOWW Policy Handbook for additional guidance. Retain a copy of this completed form in Chapter, Department/State and Region records.

A. APPLICANT INFORMATION (REQUIRED; PLEASE PRINT)

1. Applicant Name: _____
(PRINT THE APPLICANT'S FULL NAME, RANK, SERVICE)
2. Mailing Address: _____
(PRINT THE FULL MAILING ADDRESS)
3. Email Address & Phone Number: _____
(PRINT THE FULL EMAIL ADDRESS AND PHONE NUMBER)
4. Chapter Name: _____
(PRINT THE CHAPTER'S NAME)

B. OATH OF OFFICE (REQUIRED; PLEASE PRINT)

“I, _____, do hereby pledge myself to uphold the National Constitution and Bylaws of the Military Order of the World Wars, and the Bylaws of my Chapter, Department/State and/or Region, and to faithfully perform the duties as _____ of the _____, with firmness and impartiality and with a sincere spirit of devotion to its duties and to do all in my power to advance and promote the high ideals, principles and policies of the Military Order of the World Wars as outlined in the National Constitution, Bylaws and Policy Handbook of the Order, and of my Chapter, Department/State and/or Region.

I further pledge myself to abide by MOWW’s “Code of Ethics,” which I have read and with which I agree. I also will attend the annual National Convention, Department and Region meetings, and other applicable meetings, as an essential part of my duty.”

C. SIGNATURE & DATE (REQUIRED)

APPLICANT'S NAME, SIGNATURE AND DATE
(Print full name, rank and Service, and sign and date)