



A Unit of the Technical College System of Georgia

Office of Military and Veteran Services
 Georgia VECTR Center
 1001 S. Armed Forces Blvd.
 Warner Robins, GA 31088
 p: (478) 218-3909
 e: vets@centralgatech.edu

STUDENT VETERANS ORGANIZATION MEMBERSHIP APPLICATION

Student Information			
Last Name	First Name	Middle	Student ID Number
CGTC Student Email Address			Phone Number
@student.centralgatech.edu			()

Membership and Participation Information			
Please select your type of membership: <input type="checkbox"/> Active (Enrolled in at least one credit hour) <input type="checkbox"/> Alumni (I have graduated from CGTC)	If active, where do you take classes: <input type="checkbox"/> Warner Robins <input type="checkbox"/> Macon <input type="checkbox"/> Milledgeville <input type="checkbox"/> Crawford County	<input type="checkbox"/> Hawkinsville WDC <input type="checkbox"/> Monroe County <input type="checkbox"/> Peach County WDC <input type="checkbox"/> Putnam County	<input type="checkbox"/> GA VECTR Center <input type="checkbox"/> Online
In which officer position(s) and/or committee(s) are you interested:	Officer Positions (minimum of six credit hours required) <input type="checkbox"/> President <input type="checkbox"/> Vice President <input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer <input type="checkbox"/> Primary program representative <input type="checkbox"/> Alternate program representative	Committees <input type="checkbox"/> Activities <input type="checkbox"/> Suggestions and Recommendations

Current Military Affiliation			
<input type="checkbox"/> Active Duty <input type="checkbox"/> Air Force <input type="checkbox"/> Army <input type="checkbox"/> Coast Guard <input type="checkbox"/> Marines <input type="checkbox"/> Navy	<input type="checkbox"/> Veteran <input type="checkbox"/> Air Force <input type="checkbox"/> Air Force Reserve <input type="checkbox"/> Air National Guard <input type="checkbox"/> Army <input type="checkbox"/> Army National Guard <input type="checkbox"/> Army Reserve	<input type="checkbox"/> Coast Guard <input type="checkbox"/> Coast Guard Reserve <input type="checkbox"/> Marines <input type="checkbox"/> Marine Reserve <input type="checkbox"/> Navy <input type="checkbox"/> Navy Reserve	
<input type="checkbox"/> Military Reserve <input type="checkbox"/> Air Force Reserve <input type="checkbox"/> Army Reserve <input type="checkbox"/> Coast Guard Reserve <input type="checkbox"/> Marine Reserve <input type="checkbox"/> Navy Reserve	<input type="checkbox"/> Spouse <input type="checkbox"/> Dependent <input type="checkbox"/> Active Duty <input type="checkbox"/> National Guard <input type="checkbox"/> Reservist <input type="checkbox"/> Veteran	Please select branch of service: <input type="checkbox"/> Air Force <input type="checkbox"/> Air Force Reserve <input type="checkbox"/> Air National Guard <input type="checkbox"/> Army <input type="checkbox"/> Army National Guard <input type="checkbox"/> Army Reserve	<input type="checkbox"/> Coast Guard <input type="checkbox"/> Coast Guard Reserve <input type="checkbox"/> Marines <input type="checkbox"/> Marine Reserve <input type="checkbox"/> Navy <input type="checkbox"/> Navy Reserve

Student Signature _____ Date _____

Please return this completed form via email to vets@centralgatech.edu or at any **Admissions Office**.

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