

**Application
For
American Legion/CVSO Accreditation
For
Representing Claimants
Before The
Department of Veterans Affairs (VA)**
(revised January 17, 2014)

1. Name: _____
2. County: _____
3. Address of your County Service Office: _____

4. Your County Service Office Phone Number: _____
5. Your County Service Office e-mail address: _____
6. Your County Service Office Fax Number: _____
7. American Legion Membership Number: _____
8. Years you have been a County Veterans Service Officer: _____
9. Are you a paid employee of the county working at least 1,000 per year?

10. Will you attend at least annual CVSO training programs offered by the State of Indiana? _____
11. Does your County insure you against malpractice claims? _____
12. Have you ever been:
 1. Convicted of a felony? _____
 2. Convicted of a misdemeanor involving fraud, bribery, deceit, theft, or misappropriation? _____
13. If you have a legal employment background, have you ever been suspended or disbarred from practicing law? _____
14. Do you work in a County Veterans Service Office that has modern computer equipment? _____
15. Do you have VA accreditation through any other service organization or agency? _____
16. Have you already taken and passed VA's TRIP training course? ____ If yes, please send us a copy of your VA TRIP Training Certificate.
17. Please explain why you would like American Legion Accreditation.

Please return application to: The American Legion Veterans Service Office
Room 325, 575 North Pennsylvania Street, Indianapolis, Indiana 46204