

Medals Application Form for Merchant Navy

(Please Complete in BLOCK CAPITALS)

Please Note: Medals awarded prior to the Second World War can no longer be issued.

I wish to apply for:			
WW2]	Post	War
Please tick the approp	priate box.		
SECTION 1: VETERA	AN'S DETAILS		
Title (Not Compulsory)			
Full Name(s) (Include Middle Names)			
Date of Birth	DD/MM/YYYY		
Place of Birth			
Service Number (Discharge Book Number)			
Rank			
Dates of Service	From: DD / MM / YYYY		To: DD / MM / YYYY

If you are the service person detailed above, please go to Section 3.

PART 2A: APPLYING ON BEHALF OF A LIVING VETERAN

You must hold Power of	f Attorney if you	are applying for	the person de	tailed in Section
1.				

I,	
Confirm that I hold Power of Attorney for	

and enclose a copy, not an original, with this application.

Now please go to Section 3.

SECTION 2B: APPLYING ON BEHALF OF A DECEASED VETERAN

You must be the official Next of Kin in order to apply.

The Official Next of Kin is the first person from the following list who is still alive. Please tick the relevant box. This order is based on Intestacy Law.

Surviving Spouse	Eldest Child		Parent
Eldest Grandchild	Grandparents		Brother of the whole Blood
Sister of the whole Blood	Brother of the half Blood		Sister of the half Blood
Nephew of the whole blood	Niece of the whole Blood		Nephew of the half Blood
Niece of the half blood	Other	-	

The Veteran's date of death was	
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Please enclose a copy of the person's death certificate or their notification of death (this is not required if they died in service).

I,	
Confirm that I am the official Next of Kin of	

SECTION 3: PERMISSION OF NEXT OF KIN

Į	Use this section	ı if you are	the legal ber	neficiary or o	official nex	kt of kin and	l wish to giv	ve	
ŗ	permission for r	nedals or i	nformation to	be release	d to a diffe	erent family	member /	family	friend

I authorize (Ful Name)	II				
of (Address)					
to receive on my behalf any medals or details of medals entitlement to which I have claim					
Signed				Date	DD / MM / YYYY
					_

SECTION 4: DECLARATION

Now complete your full details, sign, then print off this form and finally post it to the address shown below.

I confirm that the information I have given is accurate and complete to the best of my knowledge and belief.

Signature		
Print Name		
Date	DD/MM/YYYY	
Address		
		Postcode
Telephone Number		
Email Address		

Please return this completed form to the address below. You must also enclose:

- 1. Evidence of the ex-serviceman/woman's death if he/she died after discharge from the service (e.g. photocopy of death certificate).
- 2. The written and signed permission of the legal beneficiary or next of kin, if that is not yourself. (See Part 4)
- 3. A copy of the last known Will of the deceased if part 2(b) is signed by the legal Beneficiary

SECTION 5: PRIVACY STATEMENT

- 1. Veteran (living or deceased) name, D.O.B, discharge book number, awards issued and medals issue number are the only details on the medal roll.
- 2. NOK details are used solely to establish their eligibility as next of kin in order of priority to make an application based on intestacy law.

Your information

We collect personal information about you to carry out our official duty in order to keep the Merchant Navy Medal Roll up to date.

For more information on how we use your information please see our full privacy policy available on our website:

https://www.gov.uk/government/organisations/maritime-and-coastguard-agency

When completed, return this form to:

to: Registry of Shipping and Seamen

Anchor Court, Keen Road Cardiff CF24 5JW

United Kingdom

Tel. No: 0203 90 85206

Email: seafarers.registry@mcga.gov.uk