

## STUDENT VETERANS OUTREACH REPORTING FORM

VFW Liaison Name:	Department:
Member Number:	Post Number:
College or University:	
City, State & Zip:	
Student Veteran POC:	
Date & time of event:	
Please list details to include event type, Post members present, student veterans present, new members recruited and any additional outcomes.	
new members recruited und uny duditional outcomes.	

Please complete this form and email or fax it to your Department Headquarters  $\underline{and}$  the National VFW Programs Department.

Email: <a href="mailto:lrolf@vfw.org">lrolf@vfw.org</a> Fax: 816-968-1149 Tel: 816-756-3390 ext 6116