

**Combat Veterans Motorcycle Association of Nevada, Inc.**  
**Wheels For Warriors Program**  
**Application**

By my signature below, I hereby apply for consideration for the Combat Veterans Motorcycle Association of Nevada (CVMA-NV) Wheels For Warriors Program (W4W).

I certify that the following information is true to the best of my knowledge:

I am an honorably discharged U. S. Veteran or currently serving on Active Duty with the United States Armed Forces. I understand that submission of an application does not guarantee acceptance into the program. I further understand that CVMA-NV may interview me, my family and contact the references I have provided below. I authorize CVMA-NV to contact these individuals and grant permission for them to speak with CVMA-NV concerning me and my application, my background and I hereby authorize any person, educational institution, or company I have listed as a reference on my application to disclose in good faith any information they may have regarding my qualifications and fitness for participation. I will hold any former employers, educational institutions, and any other persons giving references free of liability for the exchange of this information and any other reasonable and necessary information incident to this application.

**I understand that to be considered, I must provide a copy of my DD-214/Service Transcript and Nevada Driver's Record.**

Name		
Street Address		
City, ZIP		
Preferred Contact #	Mobile or Land Line?	
E-Mail		
Operator License: <i>State, Class and Endorsements</i>		
<i>At your interview, you must provide your Driver's Record dated within the past 30 days.</i>		
Current Employer Name		
Supervisor Name	Supervisor Contact#	
Month/Year started	Job Title	
Branch of Service	Grade/Rank	MOS:
Discharge Date	Discharge Type	Length of Service
Combat - Theater, Unit and Dates		
Marital/Family Status		
Veteran Group Affiliation(s)		
Why do you feel that a motorcycle will make your life better?		

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What is your preferred riding style? Sport Touring Adventure V-Twin/Cruiser  
With what size bike are you familiar/comfortable? 600-900cc 900-1200cc Over 1200cc  
Would you require modifications to the bike to be able to ride? Yes No. If Yes, please describe: All Hand Controls Trike Wheel Chair Platform Automatic  
Other:

Please tell us about your motorcycle experience – number of years, notable events...

Reference 1:

Reference 2:

How did you hear about this program?

Please include any additional comments to help us get to know you better.

Signature

Date