



# Rhode Island Veterans Memorial Cemetery

## APPLICATION FOR INTERMENT

**Rhode Island Veterans Memorial Cemetery**  
**301 South County Trail**  
**Exeter, RI 02822**  
**TEL: (401) 268-3088 FAX: (401) 295-8797**  
**Vets.rivmc@vets.ri.gov**

**PLEASE READ ALL INSTRUCTIONS AND REQUIREMENTS.** All required documents with the original application must be submitted to the RIVMC. See page 2 for requirements and procedures. This form must be completed in its entirety.

**VETERAN APPLICANT'S NAME, PERSONAL AND SERVICE INFORMATION: (Type or print legibly)**

1. FIRST		2. MIDDLE (or Initial)		3. LAST (Legal Last Name; not Maiden Name)		4. SUFFIX	
5. DATE OF BIRTH MONTH DAY YEAR		6. SOCIAL SECURITY NUMBER - -		7. MARITAL STATUS: MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED <input type="checkbox"/> NEVER <input type="checkbox"/> DIVORCED <input type="checkbox"/> MARRIED <input type="checkbox"/>		8. GENDER: MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>	
PLACE OF BIRTH:						9. MILITARY STATUS: VETERAN <input type="checkbox"/> RETIRED <input type="checkbox"/> ACTIVE DUTY <input type="checkbox"/>	
10. BRANCH OF SERVICE (must be consistent with rank) ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> COAST GUARD <input type="checkbox"/> OTHER (SPECIFY) _____				11. WAR SERVICE: (must be consistent with discharge & Federal guidelines) WWII <input type="checkbox"/> KOREA <input type="checkbox"/> VIETNAM <input type="checkbox"/> PERSIAN GULF <input type="checkbox"/> AFGHANISTAN <input type="checkbox"/> IRAQ <input type="checkbox"/> OTHER (SPECIFY): _____			
12. SERVICE NUMBER		13. HIGHEST RANK ATTAINED (including Reserve, provide document)		14. LAST NAME ON DD-214 IF DIFFERENT THAN ABOVE			
15. PERIOD(S) OF <b>ACTIVE DUTY</b> MILITARY SERVICE and/or National Guard/Reserve Service: Entry date(s) and place: _____ Discharge date(s) and place: _____				16. If <b>Retired Military</b> (Active or Reserve), date of retirement: _____			

**SPOUSE'S NAME AND PERSONAL INFORMATION:**

17. FIRST		18. MIDDLE (or Initial)		19. LAST (Legal Last Name; not Maiden Name)		20. SUFFIX	
21. DATE OF BIRTH MONTH DAY YEAR		22. SOCIAL SECURITY NUMBER - -		23. WILL VETERAN'S SPOUSE ALSO BE INTERRED AT THIS CEMETERY? YES <input type="checkbox"/> NO <input type="checkbox"/>		24. IS SPOUSE ALSO A VETERAN? (Documentation <u>must</u> be provided at this time) YES <input type="checkbox"/> NO <input type="checkbox"/>	
PLACE OF BIRTH:							
25. IF SPOUSE IS ALSO A VETERAN, PLEASE CHOOSE ONE OF THE FOLLOWING: (Only if eligible and all documentation received prior to Veteran spouse burial, otherwise will be in same gravesite)				I DESIRE TO BE INTERRED WITH VETERAN <input type="checkbox"/> <b>OR</b> I DESIRE ADJACENT GRAVE OF MY OWN <input type="checkbox"/>			

**PERSON LEGALLY RESPONSIBLE FOR THESE ARRANGEMENTS:**

I hereby certify under the penalty of perjury that all information I have provided on this application and the supporting documentation is true and correct to the best of my knowledge.

I acknowledge that Federal Law prohibits persons who have been convicted of certain crimes from being buried in Federally funded state Veteran Cemeteries and certify to the best of my knowledge and belief that the above-named Veteran was never convicted of a Federal or State capital crime for which a sentence of imprisonment for life or the death penalty may be imposed and was never sentenced to a minimum of life imprisonment upon conviction of any sex offense. 38 U.S.C. §2411 Summary Persons Found Guilty of a Capital Crime and Persons Convicted of Certain Sex Offenses

I acknowledge that any falsification of information, or my failure to disclose any information I am aware of that would have made an individual ineligible for interment, could result in that individual being removed from the RIVMC at my own expense.

**Printed Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

		26. RELATIONSHIP TO VETERAN	
27. FIRST		28. MIDDLE (or Initial)	
		29. LAST	
		30. SUFFIX	
31. CURRENT ADDRESS (Number, Street, City, State, Zip)		32. PHONE NUMBER(S) Home: Cell:	
		33. EMAIL	

## Interment Application Instructions and Requirements for Rhode Island Veterans Memorial Cemetery

**BEFORE SCHEDULING SERVICE**, the following documents must be provided:

1. The original, completed Application for Interment Registration and Burial Preference Worksheet.
2. Copy of all military service documentation (DD214, *et al.*), and military valor award documentation (i.e. Purple Heart, etc.)
3. Residency documentation (see below).
4. Official signed copy of marriage certificate or legal proof of marriage (state/IRS tax return or completed Death Certificate).  
If spouse is also a Veteran, a separate application with supporting documentation must be completed at this time.

**ELIGIBILITY** for a Veteran's interment at the cemetery is based on **Military Service**.

**Military Service:** (Veteran service records may be requested at <https://www.archives.gov/Veterans/military-service-records>)

- The Veteran was discharged or released from active duty service (other than for training purposes) under honorable conditions. Must be two years of active service during peacetime or active service during a wartime period for which a Campaign or Expeditionary Medal was awarded. Certain exceptions apply. Visit [https://www.cem.va.gov/cem/burial\\_benefits/eligible.asp](https://www.cem.va.gov/cem/burial_benefits/eligible.asp) for complete eligibility requirements. A copy of the DD214 or other detailed military discharge documentation must be provided.
- The Veteran served at least 20 years in the National Guard or Reserve and received retired pay or has documentation verifying he/she will receive retired pay at age 60, in accordance with Title 10, Chapter 1223. A copy of Title 10 letter and all other documentation must be provided.
- The individual has at least six (6) years of service in the Rhode Island National Guard or a Reserve Component OR at least six (6) years of National Guard or Reserve component service with another state and the person is a Rhode Island resident for at least two (2) consecutive years prior to death. A copy of NGB-22 or Reserve Documentation must be provided.

**Residency:**

- If individual served in the National Guard or reserve Component from a state other than Rhode Island, proof of Rhode Island residency for at least two consecutive years after discharge is required. Acceptable documentation includes a photocopy of Rhode Island driver's license, voter registration records or state/IRS tax forms showing two years of residency.

**MARRIAGE:** Veteran and spouse must be legally married. Any former spouse of an eligible Veteran whose marriage to that Veteran has been terminated by annulment or divorce is not eligible.

**DEPENDENT CHILDREN:** A separate Dependent Child Application for Interment must be submitted at the time of application for Veteran and/or spouse to ensure interment.

1. Deceased, unmarried, dependent minor child, under 21 years of age, or under 23 if pursuing a course of instruction at an approved educational institution.
2. Unmarried adult child incapable of self-support with physical or mental disability acquired before age 21, or 23 if pursuing a course of instruction at an approved educational institution and is totally dependent upon the eligible Veteran for support. Required documents include: (i) letter from the Child's doctor or court documentation stating that child is totally dependent on Veteran for support, type of disability and at what age it was acquired, (ii) Social Security Disability Award Letter and (iii) copy of the full birth certificate.

**FEES:**

- There is no charge for the Veteran for initial burial.
- A liner fee (full casket or cremation burial) subject to change and paid at time of interment will be charged for burial of spouse and qualified dependent(s). Checks made out to the **RI Veterans Home Fund**. (\$35 returned check fee). Contact office for current fees.

**PERSONS FOUND GUILTY OF A FEDERAL OR STATE CAPITAL CRIME, ARE INELIGIBLE.**

**\*38 U.S.C. §2411 Summary Persons Found Guilty of a Capital Crime and Persons Convicted of Certain Sex Offenses**

Under 38 U.S.C. § 2411, interment or memorialization in a VA national cemetery or in Arlington National Cemetery is prohibited if a person is convicted of a Federal or State capital crime, for which a sentence of imprisonment for life or the death penalty may be imposed and the conviction is final. Federal officials may not inter in Veterans cemeteries persons who are shown by clear and convincing evidence to have committed a Federal or State capital crime but were unavailable for trial due to death or flight to avoid prosecution. Federally funded State Veterans cemeteries must also adhere to this law. This prohibition is also extended to furnishing a Presidential Memorial Certificate, a burial flag, and a headstone or marker. Under 38 U.S.C. § 2411, interment or memorialization in a VA national cemetery or in Arlington National Cemetery is prohibited if a person is convicted of a Tier III sex offense, who was sentenced to a minimum of life imprisonment and whose conviction is final. Federally funded State and Tribal organization Veterans cemeteries must also adhere to this law. This prohibition also applies to Presidential Memorial Certificate, burial flag, and headstone and marker benefits.

**UPON ARRIVAL FOR SERVICE:** The following documents must be presented before or upon arrival, or service **may** be rescheduled.

- Original Cremation Certificate **or** Original Burial Transit Permit.
- **COMPLETED** and **SIGNED** Claim for Standard Government Headstone or Marker, VA Form 40-1330. (Flat Granite marker or niche only)
- Death Certificate.
- Original Interment Application and check for any applicable liner fees.

**I certify under the penalty of perjury that I have read and understand all of the rules, regulations, requirements and obligations for interment in the Rhode Island Veterans Memorial Cemetery.**

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

RELATIONSHIP TO VETERAN: