

DISABLED VETERANS SPECIAL BIG GAME HUNT APPLICATION

(MUST BE SUBMITTED NO LATER THAN JANUARY 31, 2025)

Idaho Fish and Game makes five tags available each year to disabled veterans. Tags are eligible for any hunt for deer, elk, pronghorn, moose, black bear, or mountain lion (except controlled hunts with less than 5 tags are not eligible). If chosen, participants are exempt from licensing requirements and the tag is free. The tag is a once in a lifetime opportunity.

Each year, the Idaho Division of Veterans Services will screen all applicants and provide a list of screened applicants to Idaho Department of Fish and Game in priority order of issuance. **The top two candidates sponsored by Idaho Divisions of Veterans Services will receive a tag** and Fish and Game will issue the three remaining tags to candidates sponsored by other qualified organizations. This is the application to be sponsored by the Idaho Division of Veteran Services for an Idaho Disabled Veterans Special Big Game Hunt tag.

To be sponsored for a Disabled Veterans Special Big Game Hunt tag by the Idaho Division of Veteran Services you must be a resident of Idaho and have a disability rating from the Department of Veterans Affairs.

Please fill out the application found on the Idaho Division of Veterans Services web page at <u>veterans.idaho.gov</u>, and either mail it to Idaho Division of Veterans Services, Attn: Disabled Veterans Special Big Game Hunt, 351 Collins Road, Boise, Idaho 83702; fax it to 208-780-1301 or email it to <u>idvs@veterans.idaho.gov</u>.

A committee consisting of past hunt participants, a representative from the Idaho Veterans Affairs Commission, veteran service organization representatives and personnel from the Idaho Division of Veterans Services will make the final selections. The selected veterans will be notified by IDVS. **All personal information submitted will be confidential and used only by the selection committee. Please note that the committee may reach out to you to interview you if more information is required to make their selection.**

Please contact Kevin Wallior, 208-780-1308 or kevin.wallior@veterans.idaho.gov if you have any questions.

IDAHO DIVISION OF VETERANS SERVICES 351 Collins Road Boise, ID 83702

DISABLED VETERANS ELK HUNT APPLICATION CHECKLIST

Before mailing, faxing, or e-mailing your application please review this checklist to ensure that you have included all required documentation. We will be unable to process your application or consider you for this hunt if any of the required documentation is missing.

☐ Completed Application

- O Make sure yours and your emergency contact's phone numbers and addresses are up to date. If either of the addresses or phone numbers change after submitting your application, please contact IDVS at 208-780-1300 as soon as possible to update that information.
- o Please answer all of the questions.
- o Don't forget to sign the signature block.
- ☐ Copy of your DD Form 214
- ☐ Copy of your VA Disability Rating Letter

PERSONAL DATA

PLEASE PRINT

ALL PERSONAL INFORMATION SUBMITTED WILL BE CONFIDENTIAL AND USED ONLY BY THE SELECTION COMMITTEE

LAST NAME:			
FIRST NAME:			MIDDLE INITIAL:
MAILING ADDRESS:_			
CITY:		STATE:	_ ZIP CODE:
PHONE NUMBER:		CELL PHONE: _	
EMAIL ADDRESS (OP	ΓΙΟΝΑL):		
EMERGENCY CONTA	ACT		
EMERGENCI CONTA	101		
LAST NAME:			
FIRST NAME:			MIDDLE INITIAL:
MAILING ADDRESS:_			
CITY:		STATE:	_ ZIP CODE:
PHONE NUMBER:		CELL PHONE: _	
EMAIL ADDRESS (OP	ΓΙΟΝΑL):		
INFORMATION REQ	UIRED FOR TAG		
DATE OF BIRTH:	GENDER:	HEIGH	T: WEIGHT:
HAIR COLOR:	EYE COLOR: _		
ANIMAL: (Select One)	DEER	ELK	PRONGHORN
	MOOSE	BLACK BEAR	MOUNTAIN LION
HUNT UNIT NUMBER	:		
CONTROLLED HUNT	NUMBER (if applicable):_		

PLEASE ANSWER THE FOLLOWING QUESTIONS Will you have an outfitter, guide, or hunting organization assisting you? Yes _____No ____ If not, would you like IDVS to connect you with one? Yes _____No ____ What percentage is your disability rating from the VA? ______% (Please enclose a copy of your VA disability rating letter) Is your disability combat related? Yes _____No _____

Please describe the nature and extent of your disability:

BACKGROUND INFORMATION

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Please describe the circumstances of your service-connected disability, how/where did it occur:
Please provide a little background on your military service:

WHY I WANT TO ATTEND A BIG GAME HUNT

In the space provided below, please describe why you wish to attend a big game hunt:
By my signature below, I waive all liability connected with my participating in the hunt.
Applicant Name (printed):
Signature of Applicant: Date: