Statutory Instrument 194 of 1997.

War Veterans (Registration) Regulations, 1997

IT is hereby notified that the Minister of Public, Service, Labour and Social Welfare has, in terms of section 7 of the Veterans Act [*Chapter 11:15*]; made the following regulations:—

1. Title

These regulations may be cited as the War Veterans (Registration) Regulations, 1997.

2. Establishment of register

The Director shall establish a register to be known as Register of War Veterans, which may be divided into such parts as the Minister may consider necessary.

3. Application for Registration

An application for registration as war veteran shall be in form specified in the Schedule.

4. Entry into register

The name of every person whose application for registration as war veteran is successful shall be entered into the register or such part or parts of the register as the Director may direct.

Form WV1

SCHEDULE (Section 3)

WAR VETERANS ACT [CHAPTER 11:15]

APPLICATION FORREGISTRATION **Place**

of vetting

1.	Province District
	Place Date
	Particulars of applicant
2.	Names in-full (actual names)
3.	Postal or residential address
4.	Date of birth Place of birth Se
5.	Birth certificate number
6.	ID. Number
7.	Level of education
	employer/self employed
9.	Names of parents :
	(a) Father
	(b)Mother
	Recruitment details
10.	Assumed name (nom de guerre)
11 I	Point of joining exit from Zimbabwe Date -
12.	Name of recruiter
13.	First place approached on leaving Zimbabwe
14.	Name of Commander
	at which stationed

Military training						
16.	Trained	or	not • 17.	Number of	trained f years of	
	ing				jeuis or	
	Places of training and names of Con					
	e of training	1	Name of Comm	ander		
1.		1.	Ū.			
2.		2				
3.		3			*	
4.		4				
19.	Types of special training:					
1.		1				
2.		2				
3.						
		Operation	al development			
	Point of entry into Zimbabwe.		· · · · · · · · · · · · · · · · · · ·			
21.	NameofdetachmentoperatingfromMozambique)		sector and	-		person was
22	-					
	Name of detachment commander		•••••	•••••		
	Operational areas and sector comma					
~						
3						
24.	Name/Head of De during					
25.	Name of field provincial					
		Cessation of	of war activities			
26.	Assembly point stayed					
27.	Demobilisation number		Place			
28	Give names of 2 people you stayed v	with at this base	:			
(1)		(2)				
29.	Highest rank held					
30. Give names of your dependent children born outside Zimbabwe:						
	Name	Date of birth		Place of birt	h	
•••••				••••		
•••••	••••••			••••••		
•••••	••••••			••••••		
•••••						
	~					
31.	Give names of comrades-in-arms still Name	ll alive (<i>excludi</i> Rank	ng names of senior	r party official: Duty	s unless same	? rank was held)
1				•		
~						
•						
4						
		•••• ••• ••• ••• ••• ••• •		•••• ••• ••• ••• ••• •••		

Other dependants Dependent children (*other than those listed in paragraph 30*): 32.

Grade/College

Name

Date of birth

Employer

	-	
1		
2		
3		
4		
τ	••••••	•••••••••••••••••••••••••••••••••••••••
22 Dements of applicants		

33.	Parents	of	app.	licant:	
.	0.0.1				

Name of father	
Name of mother	

DECLARATION BY CLAIMANT

I-(full names), hereby declare that the information given by me in this application is, to the best of my knowledge and belief, true and correct in every respect. I understand that any false statement in this application may render me-liable to prosecution. I also declare that this application, together with my statements, have been read to me and fully explained in a language which I understand and that I have no further facts to add to my application.

Applicant's Signature

Mark or Right Thumb print

Social Welfare Officer's Signature Post held

Date :

35. Vetting officers:

We the undersigned confirm/do not confirm that the applicant is a war veteran in terms of the War Veterans Act [*Chapter 11:15*]

Name	Signature	Date
1		
2		
3		
4		

36. Certification of status:

I am satisfied that the applicant has been properly vetted and has been advised that if he is not satisfied with the determination of his application, he may appeal to the Board.

Provincial Social Welfare Officer OR Other authorized officer / DATE STAMP (Signature)

Note.—Birth certificates should be produced to verify the identity and date of birth of any dependent child.