



# MAIL-IN COVER LETTER

Mail to: Honoring Our She'roes OR Email to: Sheroes@lv-connect.org  
PO BOX 1301  
Nicholasville, KY 40340-1301

To be honored during our November 11, 2020 Live virtual She'roes Event, the deadline for mail in submissions must be postmarked by November 4, 2020. Electronic submissions via our website are accepted through November 8<sup>th</sup>. Please only submit one way (either mail in or electronically). Any packets received after these dates are welcomed, while they may not be included in the virtual event, they will be included on the She'roes Honor Wall at our Winchester, KY location.

Veteran's Name: \_\_\_\_\_

Branch of Service: \_\_\_\_\_

Service Date(s): \_\_\_\_\_  Service Date is Estimated

Deceased Date (if applicable) \_\_\_\_\_

I am NOT the Veteran. My relationships is: \_\_\_\_\_

My Name (if different than the Veteran) \_\_\_\_\_

My Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

My phone: \_\_\_\_\_ Best time to reach me: \_\_\_\_\_

My Email: \_\_\_\_\_

I would like an Invitation to Attend the November 11<sup>th</sup> She'roes Live Web Event. I understand I will receive an email invitation to the email address provided above.

I am interested in being interviewed by Lady Veterans Connect

Please confirm submission of:

- This cover letter
- A 5x7 uniform photo with Veterans Name on back
- Signed Photo Release Form
- Notarized Statement or Power of Attorney (if applicable)
- Questionnaire (completion in part or full is acceptable)
- Optional additional photos. (Total photos: \_\_\_\_\_ )
- Optional Photo Explanation Page(s)



Lady Veterans Connect, Inc.  
11400 Irvine Road  
Winchester, KY 40391

# PHOTO RELEASE

Instructions: Check applicable selections, initial blanks for accepted clause(s). Sign and date. Keep copy for your records.

I am submitting photo(s) with bio for myself, the undersigned furthermore referred to as the "Releasor" OR

**Complete this section only when submitting for another person**

I am submitting photo and bio for another veteran. Veteran's Name: \_\_\_\_\_,

Relation to me is: \_\_\_\_\_.

The Veteran listed above is deceased. I the undersigned, take full responsibility for the accuracy of the bio information and understand through this action I am the legally defined releasor for photo(s) and bio submission

OR

I am submitting photo and bio for another Veteran, listed above. I am submitting either:

a legal Power of Attorney OR

a signed notarized statement of permission from the Veteran to act as the Releasor on their behalf

I, \_\_\_\_ (Initials) the Releasor, or authorized releasor, as indicated above and identified below, grant permission and consent to Lady Veterans Connect, Inc. and their collaborators and subsidiaries (the "Releasee") for the use of the submitted photograph(s) for presentation under any legal condition, including but not limited to: publicity, copyright purposes, illustration, advertising, and web content. I waive any right to royalties or other compensation arising or related to the use of my image and biographical information used in accordance to the following selections.

I, \_\_\_\_ (Initials) the Releasor, submit identifying biographical content (referred to as "bio" elsewhere within this photo release) regarding military service for use on the She'roes wall. **(AKA Physical Honor Wall ONLY)**

I, \_\_\_\_ (Initials) the Releasor, authorize the unrestricted use of identifying bio content, for use in all digital, electronic, social media, and other printed purposes to the Releasee. **(AKA Any Digital Use - Optional)**

Releasor's Printed Full legal name \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

By signing and dating this document I acknowledge that I have completely read and fully understand the above release and agree to be bound thereby. I hereby release any and all claims against any person or affiliated entity with Lady Veterans Connect, LLC.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



# She'roes Questionnaire & Survey

Lady Veterans Connect, Inc.  
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Winchester, KY 40391

We are honored to recognize women veterans for their service and thank you for serving and willing to share your story, as it can make a difference in the life of another veteran and raise awareness that women veterans served too. This questionnaire will ask some questions to be used in the panel discussion and other questions that will be kept confidential and will not be used to identify you (those sections are marked accordingly). Most importantly share only what you are comfortable sharing. Please indicate the total number of pages attached for Questionnaire:

## Introduction of Female Veteran

Veterans Name: \_\_\_\_\_ Final Rank: \_\_\_\_\_

Branch of service?  Army  Air Force  Coast Guard  Navy  Marines  State Guard  Multiple

Active or Reserve?  Active  Reserve Dates of Service \_\_\_\_\_

Your Military Experience (Attach Separate paper and number, accordingly, please place your name on each page).

- ME#1 Why did you join the military?
- ME#2 By joining the military, what ideals and experience were you hoping for?
- ME#3 List Locations of Service or submit a military resume.
- ME#4 Brief description of your experience in the military (such as it was a good, neutral, bad, life changing, etc.)
- ME#5 Do you consider yourself a leader? Always Sometimes Never
- ME#6 What advice would you give a female joining or exiting the military today that would make her transition easier in finding a job, re-establishing relationships, being active in the community, etc.
- ME#7 How has the military bettered or damaged your sense of self-worth as a female?
- ME#8 Pronoun I wish to be identified as:  Her/She  He/Him  They/Them

Panel Discussion Questions – These will be topics that we will discuss during the November 11, 2020 virtual event. Please provide your feedback and suggestions. (Attach Separate paper and Number accordingly).

- PD#1 In general, what are some of the biggest issues that are most prominent in the military?
- PD#2 What are the most prominent issues pertaining specifically to females in the military?
- PD#3 What, speaking generally, is/are the biggest hurdle(s) regarding transition back into civilian life?
- PD#4 What are some generalized issues for female veterans?
- PD#5 What are some non-generalized issues for female veterans, in your opinion?
- PD#6 What are some issues that are going to surface, have surfaced, or pre-existing conditions that have been intensified, due to Covid-19?
- PD#7 Regarding Covid-19, How did you interpret “social distancing”? How has it affected your mental state?
- PD#8 Considering Covid-19 how do you think other female veterans interpret “social distancing”/physical distance protocols? How do you think it affects other female veterans?
- PD#9 In a general statement, what is your opinion about the issues regarding military sexual trauma and how it is handled?
- PD#10 Do you think Military Sexual Trauma (MST) is under reported? Yes No Unsure

- PD#11 Do you think MST is not taken as seriously as it should be by higher-ranking personnel?
- PD#12 Please select topics you would like to see discussed in the panel? (check all that apply)
- |   |   |
|---|---|
| <input type="checkbox"/> Financial Planning   | <input type="checkbox"/> Wills & End of life planning                     |
| <input type="checkbox"/> Gender Bias  | <input type="checkbox"/> Burial in National Cemetery                      |
| <input type="checkbox"/> Burial in State Cemetery   | <input type="checkbox"/> Residency in one of Kentucky's Veteran's Homes   |
| <input type="checkbox"/> Budgeting  | <input type="checkbox"/> Applying for benefits to Veterans Administration |
| <input type="checkbox"/> Resources available to female veterans                               | <input type="checkbox"/> Forming a support group                          |
| <input type="checkbox"/> Art Therapy  | <input type="checkbox"/> Military Sexual Trauma                           |
| <input type="checkbox"/> Equine Therapy   | <input type="checkbox"/> Combat exposure regarding female veterans        |
| <input type="checkbox"/> Female representation across branches                                | <input type="checkbox"/> Service Dogs / ESA                               |
| <input type="checkbox"/> Increased availability of high-risk position held by female veterans |   |
- PD#13 What are some topics you would like to see discussed in the panel that were not listed or included in this survey?
- PD#14 I am interested in receiving ongoing information regarding these topics after the panel event
- Yes, I don't have email, please mail to me. (I will provide my mailing address on an attachment)
- Yes, by email. Email address \_\_\_\_\_
- No

CONFIDENTIAL SECTION BELOW - All information is optional and will NEVER identify you unless you otherwise specify. If you choose not to answer any question, select NA. IF you wish to elaborate more on any question in how it has affected your life after exiting the military please attach a separate sheet of paper and mark question Number accordingly.

- CS#1 Have you ever struggled or had an addiction to a pain medication or other illicit drugs?
- Yes       No       NA
- CS#2 Have you ever lost a loved one to suicide?       Yes       No       NA
- CS#3 Have you ever had suicidal ideation?       Yes       No       NA
- CS#4 Have you ever had suicidal intent?       Yes       No       NA
- CS#5 Have you ever experienced sexual trauma or MST?       Yes       No       NA
- CS#6 Have you ever sought treatment for PTSD or MST?       Yes       No       NA
- CS#7 Have you ever been diagnosed with PTSD?       Yes       No       NA
- CS#8 Would you be willing to publicly share your confidential story?       Yes       No

Confidential Demographic Information Regarding Race/Ethnicity

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Hispanic/Latino | <input type="checkbox"/> Non-Hispanic or Latino    | <input type="checkbox"/> American Indian or Alaska Native          |
| <input type="checkbox"/> Asian           | <input type="checkbox"/> Black or African American | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander |
| <input type="checkbox"/> White/Caucasian | <input type="checkbox"/> More than One             | <input type="checkbox"/> NA  |

Attach any additional Feedback regarding the survey and questionnaire and title Feedback.

\_\_\_\_ (Initials) By signing this questionnaire, I agree that the information is truthful to the best of my ability or to the wishes of the Veteran. I understand the usage of this information is for the panel discussion event and to gather demographic information of a segment in which identify as being a female veteran. Lady Veterans Connect, their collaborators and subsidiaries are bound to confidentiality of personally identifiable information unless otherwise specified.

X \_\_\_\_\_  
Printed Name of Person Completing this Survey

Date \_\_\_\_\_

Signature: X \_\_\_\_\_

Example:

ME#1 - I was voluntold.

ME#5 - Others consider me a leader, but my self impression is not that of a leader.

Example:

PD#5- The uniform fit for women

PD#9- Sexual Trauma has taken a turn for asdkfnaognoa lgnaognloo

Example:

CS#1- I say no, however, I do think CBD and THC should be further evaluated

CS#7- I was diagnosed outside of the VA system, but the VA does not recognize this diagnosis.

Additional Feedback regarding Survey and Questionnaire