



Veteran Collaborative of Ventura County

Operated by the County of Ventura – Veteran Services Office

Membership Application

Name of Agency / Organization _____

Agency Contact Person _____

Agency Address _____ City _____ Zip _____

Telephone _____ Email _____

Website _____ Facebook _____

Your agency is Non-profit Government VA Contracted Other _____

Which services does your agency provide for military and/or veterans? (Check all that apply)

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Shelter | <input type="checkbox"/> Education | <input type="checkbox"/> Pet Assistance | <input type="checkbox"/> Clothing |
| <input type="checkbox"/> Food | <input type="checkbox"/> Emergency Financial Support | <input type="checkbox"/> Tattoo Removal | <input type="checkbox"/> Behavioral Health |
| <input type="checkbox"/> Legal Services | <input type="checkbox"/> VA Benefits | <input type="checkbox"/> Dental Care | <input type="checkbox"/> Employment |
| <input type="checkbox"/> Substance Abuse | <input type="checkbox"/> Bereavement | <input type="checkbox"/> Mentorship | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Service Animals | <input type="checkbox"/> Deployment Support | <input type="checkbox"/> Ministry | <input type="checkbox"/> Resume Building |
| <input type="checkbox"/> Senior Support | <input type="checkbox"/> Medical Care | <input type="checkbox"/> Support Group | <input type="checkbox"/> Caregivers |

Other Services Provided _____

Services provided in these counties Ventura Santa Barbara San Luis Obispo

Does your agency accept volunteers? Yes No

Does your agency accept donations? Yes No

Who is your sponsoring VCVC agency* _____

*All applicants must have an existing VCVC agency sponsor. County Veteran Services Officer approval is required to join the Veteran Collaborative of Ventura County.

Email preference:

VCVC Schedule and Event information Yes No

Job Information Yes No

All VCVC emails Yes No

Please submit completed application to HSA-Veterans@ventura.org

VCVC Office Use Only Accept Denied Reason _____



Veteran Collaborative *of Ventura County*

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Mission Statement

The mission of the Veteran Collaborative of Ventura County (VCVC) is to help access coordination of care and provide networking opportunities to the Veterans of Ventura County, and their families.

Membership

VCVC partners are community representatives from local government, nonprofit agencies and faith based organizations that advocate for veterans and their families. The VCVC partners are dedicated to providing support to the military community in Ventura County.

Membership Expectations

Members are expected to conduct themselves in a professional manner. Regular attendance of monthly meetings is encouraged in order to provide current information from the organization they represent.

Members may access the VCVC website to communicate events, job announcements and benefit information to veterans.

Name of Organization

Date

Organization Representative