

INTAKE FORM

The International Legion Defence of Ukraine (ILDU)

Date of application (dd/mm/yy):

Passport ID number:

Last name:

First name:

Citizenship:

Date of birth (dd/mm/yy):

Contact phone number:

Formal military experience (YES / NO):

Years of service:

Year last active:

Combat experience (YES / NO):

When:

Where:

How long do you intend to stay in Ukraine:

What is your reason for coming to Ukraine:

Do you understand that this is a real and terrible war similar to WW2? (YES / NO):

Military skill set (Infantry, mortar, medical training etc.):

Language skills:

Criminal convictions (YES /NO) If yes - nature of conviction):

Medical concerns, medication taken, psychological conditions:

Home address:

Applicants signature:

Applicants mobile number: