

Biographical Data Form

To ensure inclusion in the Veterans History Project, this form must accompany each submission. **Please use reverse or additional sheet if service was in more than one war or conflict.**

PLEASE PRINT CLEARLY

Veteran Civilian STANLEY RUZYCKI

Place of Birth N.Y.C. Birth Date 1-21 //year

Race/Ethnicity (optional) _____ Male Female

Branch of Service or Wartime Activity ARMY

Commissioned Enlisted Drafted Service dates 3/12/43 to 12/8/45

Highest Rank TEC 3

Unit, Division, Battalion, Group, Ship, etc. (Do not abbreviate.) _____

War, operation, or conflict served in WWII PRISONER OF WAR

Locations of military or civilian service GERMANY

Battles/campaigns (please name) BATTLE of the Bulge
captured

Medals or special service awards. If so, please list (be as specific as possible):

purple heart

Special duties/highlights/achievements medic

Was the veteran a prisoner of war? Yes No

Did the veteran or civilian sustain combat or service-related injuries? Yes No

Interviewer (if applicable) _____

(Please use reverse for any additional biographical information.)

