

# My Military Service

Name: \_\_\_\_\_  
Last First Middle

DOB: \_\_\_\_\_ POB: \_\_\_\_\_

Service Branch: \_\_\_\_\_ Service/Serial/ SSN: \_\_\_\_\_

Date of Enlistment: \_\_\_\_\_ Date of Separation: \_\_\_\_\_

Highest Rank: \_\_\_\_\_ MOS/AFSC/Rating/ \_\_\_\_\_

Basic Military Training at: \_\_\_\_\_ Dates: \_\_\_\_\_

My DD-214/Discharge Documents are located at: \_\_\_\_\_

## Awards & Decorations:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Units & Location:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Veterans Organizations Memberships: \_\_\_\_\_

\_\_\_\_\_

## Service History:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

VA ID # \_\_\_\_\_

Service Records Attached: Discharge records, medical records, VA records.

Emergency Contact: Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone# \_\_\_\_\_