ARMY FORCE MANAGEMENT SCHOOL (AFMS)

5500 21st St. Building 247 Suite 1400, Ft.Belvoir, Va. 22060

www.afms1.belvoir.army.mil

Student Data Card/Application Version 3.7

COURSE INFORMATION

Course Name: ----------

Class Number: ____ - ____

Report Date:

☐ I am a **NEW** applicant **NOT** currently registered in ATRRS

STUDENT CONTACT INFORMATION

Last Name | First Name | MI | Enterprise Email (...@mail.mil)

Home Phone | Mobile Phone | Work Phone

Number | Street | City | State | Zip

AKO User ID **SSO Course Only*

EMERGENCY CONTACT INFORMATION

Full Name | Relation | Phone Number

Number | Street | City | State | Zip

STUDENT OCCUPATION INFORMATION

Current or Losing Unit/Org | Current or Losing Unit/Org UIC | Rank/Grade | Date Of Rank

Gaining Unit/Org | Gaining Unit/Org UIC | Current Branch

Current Specialty/MOS | Current Duty Position

(Unit Force Manager, Operations Officer,Unit G-1, etc.)

Component/Status

SECURITY INFORMATION

Security Manager Name | Rank/Grade | Security Manager Phone | Classification | Date Granted

SUPERVISOR INFORMATION

Supervisor Name | Supervisor Email | 1SG/CSM/SGM's Full Name

Commander Full Name | Supervisor Phone Number | Rank/Grade

Submit Form