CLASS 00-07 STUDENT DATA AND REGISTRATION FORM

1. NAME

(LAST) (FIRST) (MI)

2. ADDRESS:

HOME - (Street, Town, State, & Zip code)

3. SSN 4. RANK/GRADE: Other 5. DATE OF RANK:

6. BRANCH: 7. PRIME CMD & ORGANIZATION:

8. CURRENT DUTY POSITION AND PRIMARY RESPONSIBILITIES:

9. HOME PHONE: 10. WORK (COMM):

11. FAX PHONE: 12. WORK (DSN):

13. E-MAIL ADDRESS:

14. ARE YOU:

15. DESCRIBE YOUR LAST FOUR JOBS:

COMMAND:	POSITION:	YEARS:

16. DID YOU READ THE ENCLOSED "ARMY FORCE MANAGEMENT MODEL"? (Check one) ☐ YES ☐ NO

17. EMERGENCY NOTIFICATION DATA:

PERSON TO NOTIFY:

RELATIONSHIP:

ADDRESS (if different from above):

TELEPHONE NUMBER:

18. COMMENTS:

Submit by Email