## RECORD OF MILITARY PROCESSING - ARMED FORCES OF THE UNITED STATES

(Read Privacy Act Statement and Instructions on back before completing this form.)

OMB No. 0704-0173 OMB approval expires

The public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Evecutive Services Directorate (0704-0173). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

A. SERVICE B. PRIOR SERVICE: C. SE		
	ELECTIVE SERVICE CLASSIFICATION D. SELECTIVE SERVICE REGIS	STRATION NO.
YES NO		
NUMBER OF DAYS:	CTION I - PERSONAL DATA	
	t, First, Middle Name (and Maiden, if any), Jr., Sr., etc.)	
-     -	· · · · · · · · · · · · · · · · · · ·	
3. CURRENT ADDRESS (Street, City, County,	4. HOME OF RECORD ADDRESS (Street, City, County, State,	
State, Country, ZIP Code)	Country, ŽIP Code)	
D	$R \mid A \mid F \mid T$	
5. CITIZENSHIP (X one)	6. SEX (X one) 7.a. RACIAL CATEGORY (X one or more) 7.I	o. ETHNIC
a. U.S. AT BIRTH (If this box is marked, also X (1) or (2))	a. MALE (1) AMERICAN INDIAN/ (4) NATIVE HAWAIIAN OR OTHER PACIFIC	CATEGORY (1) HISPANIC OR
(1) NATIVE BORN (2) BORN ABROAD OF U.S. PARENT(S)	b. FEMALE (2) ASIAN ISLANDER	LATINO
b. U.S. NATURALIZED ALIEN REGISTRATION NUMBER C. U.S. NON-CITIZEN (If issued) NATIONAL	(3) BLACK OR AFRICAN (5) WHITE AMERICAN	(2) NOT HISPANIC OR LATINO
d. IMMIGRANT ALIEN (Specify) e. NON-IMMIGRANT FOREIGN	8. MARITAL STATUS (Specify) 9. NUMBER OF DEPENDE	NTS
10. DATE OF BIRTH 11. RELIGIOUS	12. EDUCATION   13. PROFICIENT IN FOREIGN	1st 2nd
(YYYYMMDD) PREFERENCE (Optional)	(Yrs/Highest Ed Gr Completed)  LANGUAGE (If Yes, specify. If No, enter NONE.)	
(opasius)		
14. VALID DRIVER'S LICENSE (X one) YES	NO 15. PLACE OF BIRTH (City, State and Country)	
(If Yes, list State, number, and expiration date)		
SECTION II - EVAMINATIO	ON AND ENTRANCE DATA PROCESSING CODES	
	NOT WRITE IN THIS SECTION - Go on to Page 2, Question 20.)	
16. APTITUDE TEST RESULTS	· · · · · · · · · · · · · · · · · · ·	
a. TEST ID b. TEST SCORES AFQT	GS AR WK PC MK EI AS MC AO	VE
		*
PERCENTILE		
17. DEP ENLISTMENT DATA	E Lo ESLA RECRUITER IDENTIFICATION LA STN ID LA F	
	E c. ES d. RECRUITER IDENTIFICATION e. STN ID f. P	
17. DEP ENLISTMENT DATA a. DATE OF ENLISTMENT - DEP b. PROJ ACTIVE DUTY DATE (YYYYMMDD) (YYYYMMDD)  g. T-E MOS/AFS b. WAIVER (2) (3) (4)	(5) (6)   i. PAY   i. SVC ANNEX CODES   k. MSO (YYWW)	EF
17. DEP ENLISTMENT DATA  a. DATE OF ENLISTMENT - DEP (YYYYMMDD)  (YYYYMMDD)  (YYYYMMDD)		EF
17. DEP ENLISTMENT DATA  a. DATE OF ENLISTMENT - DEP   b. PROJ ACTIVE DUTY DATE (YYYYMMDD)	(5) (6)   i. PAY   i. SVC ANNEX CODES   k. MSO (YYWW)	EF
17. DEP ENLISTMENT DATA  a. DATE OF ENLISTMENT - DEP b. PROJ ACTIVE DUTY DATE (YYYYMMDD)  g. T-E MOS/AFS h. WAIVER (2) (3) (4) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	(5) (6) i. PAY j. SVC ANNEX CODES k. MSO (YYWW)	EF  I. AD OBLIGATION (YYWW)
17. DEP ENLISTMENT DATA  a. DATE OF ENLISTMENT - DEP b. PROJ ACTIVE DUTY DATE (YYYYMMDD)  g. T-E MOS/AFS h. WAIVER (2) (3) (4) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	(5) (6) i. PAY j. SVC ANNEX CODES k. MSO (YYWW)	EF  I. AD OBLIGATION (YYWW)
17. DEP ENLISTMENT DATA  a. DATE OF ENLISTMENT - DEP   b. PROJ ACTIVE DUTY DATE (YYYYMMDD)  g. T-E MOS/AFS   h. WAIVER (2) (3) (4)  18. ACCESSION DATA  a. DATE OF ENLISTMENT (YYYYMMDD)  b. ACTIVE DUTY SERVICE D (YYYYMMDD)	(5) (6) i. PAY GRADE j. SVC ANNEX CODES k. MSO (YYWW)  DATE c. PAY ENTRY DATE (YYYYMMDD) d. MSO (YYWW) e. AD/RC OBLIGATION	EF  I. AD OBLIGATION (YYWW)  (YYMMWWDD)
a. DATE OF ENLISTMENT DATA  g. T-E MOS/AFS  h. WAIVER (1)  18. ACCESSION DATA  a. DATE OF ENLISTMENT - DEP b. PROJ ACTIVE DUTY DATE (YYYYMMDD)  (YYYYMMDD)  (YYYYMMDD)  (YYYYMMDD)  (4)  (1)  18. ACCESSION DATA  a. DATE OF ENLISTMENT  b. ACTIVE DUTY SERVICE D	(5) (6) i. PAY GRADE j. SVC ANNEX CODES k. MSO (YYWW)  DATE c. PAY ENTRY DATE (YYYYMMDD) d. MSO (YYWW) e. AD/RC OBLIGATION	EF  I. AD OBLIGATION (YYWW)
a. DATE OF ENLISTMENT - DEP (YYYYMMDD)  g. T-E MOS/AFS   h. WAIVER (2) (3) (4)  18. ACCESSION DATA  a. DATE OF ENLISTMENT   b. ACTIVE DUTY DATE (YYYYMMDD)	(5) (6) i. PAY GRADE j. SVC ANNEX CODES k. MSO (YYWW)  DATE c. PAY ENTRY DATE (YYYYMMDD) d. MSO (YYWW) e. AD/RC OBLIGATION	EF  I. AD OBLIGATION (YYWW)  (YYMMWWDD)  S./HIGHEST GR COMPL Ir. STATE
a. DATE OF ENLISTMENT - DEP (YYYYMMDD)  g. T-E MOS/AFS   h. WAIVER (2) (3) (4)  18. ACCESSION DATA  a. DATE OF ENLISTMENT   b. ACTIVE DUTY DATE (YYYYMMDD)	(5) (6) i. PAY GRADE j. SVC ANNEX CODES k. MSO (YYWW)  DATE c. PAY ENTRY DATE (YYYYMMDD) d. MSO (YYWW) e. AD/RC OBLIGATION  (6) g. PAY GRADE h. DATE OF GRADE (YYYYMMDD) i. ES j. YR ED	EF  I. AD OBLIGATION (YYWW)  (YYMMWWDD)  S./HIGHEST GR COMPL
a. DATE OF ENLISTMENT - DEP (YYYYMMDD)  g. T-E MOS/AFS   h. WAIVER (2) (3) (4)  18. ACCESSION DATA  a. DATE OF ENLISTMENT   b. ACTIVE DUTY DATE (YYYYMMDD)	(5) (6) i. PAY GRADE j. SVC ANNEX CODES k. MSO (YYWW)  DATE c. PAY ENTRY DATE (YYYYMMDD) d. MSO (YYWW) e. AD/RC OBLIGATION  (6) g. PAY GRADE h. DATE OF GRADE (YYYYMMDD) i. ES j. YR ED  PEF n. T-E MOS/AFS o. PMOS/AFS p. YOUTH q. OA	EF  I. AD OBLIGATION (YYWW)  (YYMMWWDD)  S./HIGHEST GR COMPL Ir. STATE
a. DATE OF ENLISTMENT - DEP (YYYYMMDD)  g. T-E MOS/AFS   h. WAIVER (2) (3) (4)  18. ACCESSION DATA  a. DATE OF ENLISTMENT (YYYMMDD)  b. ACTIVE DUTY SERVICE D (YYYYMMDD)  c. YYYYMMDD)  f. WAIVER (2) (3) (4) (5)  f. WAIVER (2) (3) (4) (5)  k. RECRUITER IDENTIFICATION   I. STN ID   m.	(5) (6) i. PAY GRADE j. SVC ANNEX CODES k. MSO (YYWW)  DATE c. PAY ENTRY DATE (YYYYMMDD) d. MSO (YYWW) e. AD/RC OBLIGATION  (6) g. PAY GRADE h. DATE OF GRADE (YYYYMMDD) i. ES j. YR ED  PEF n. T-E MOS/AFS o. PMOS/AFS p. YOUTH q. OA	EF  I. AD OBLIGATION (YYWW)  (YYMMWWDD)  S./HIGHEST GR COMPL Ir. STATE
17. DEP ENLISTMENT DATA  a. DATE OF ENLISTMENT - DEP (YYYYMMDD)  g. T-E MOS/AFS (1)  18. ACCESSION DATA  a. DATE OF ENLISTMENT (2) (3) (4)  17. DATE OF ENLISTMENT (2) (3) (4)  18. ACCESSION DATA  a. DATE OF ENLISTMENT (YYYYMMDD)  f. WAIVER (2) (3) (4) (5)  f. WAIVER (2) (3) (4) (5)  k. RECRUITER IDENTIFICATION I. STN ID m.  s. SVC ANNEX CODES t. REPLACES ANNEXES u. TRANSFE	(5) (6) i. PAY GRADE j. SVC ANNEX CODES k. MSO (YYWW)  DATE c. PAY ENTRY DATE (YYYYMMDD) d. MSO (YYWW) e. AD/RC OBLIGATION  (6) g. PAY GRADE h. DATE OF GRADE (YYYYMMDD) i. ES j. YR ED  PEF n. T-E MOS/AFS o. PMOS/AFS p. YOUTH q. OA  ER TO (UIC)	EF  I. AD OBLIGATION (YYWW)  (YYMMWWDD)  S./HIGHEST GR COMPL Ir. STATE
a. DATE OF ENLISTMENT - DEP b. PROJ ACTIVE DUTY DATE (YYYYMMDD)  g. T-E MOS/AFS h. WAIVER (2) (3) (4)  18. ACCESSION DATA  a. DATE OF ENLISTMENT (YYYYMMDD)  f. WAIVER (2) (3) (4) (5)  k. RECRUITER IDENTIFICATION I. STN ID m.  s. SVC ANNEX CODES t. REPLACES ANNEXES u. TRANSFE	(5) (6) i. PAY GRADE j. SVC ANNEX CODES k. MSO (YYWW)  DATE c. PAY ENTRY DATE (YYYYMMDD) d. MSO (YYWW) e. AD/RC OBLIGATION  (6) g. PAY GRADE h. DATE OF GRADE (YYYYMMDD) i. ES j. YR ED  PEF n. T-E MOS/AFS o. PMOS/AFS p. YOUTH q. OA  ER TO (UIC)  7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 2	I. AD OBLIGATION (YYWW)  (YYMMWWDD)  SJHIGHEST GR COMPL  I. STATE GUARD
17. DEP ENLISTMENT DATA  a. DATE OF ENLISTMENT - DEP   b. PROJ ACTIVE DUTY DATE (YYYYMMDD)  g. T-E MOS/AFS   h. WAIVER (2) (3) (4)  18. ACCESSION DATA  a. DATE OF ENLISTMENT (YYYYMMDD)  f. WAIVER (2) (3) (4) (5)  k. RECRUITER IDENTIFICATION   I. STN ID   m.  s. SVC ANNEX CODES   t. REPLACES ANNEXES   u. TRANSFE    19. SERVICE   1   2   3   4   5   6   7	(5) (6) i. PAY GRADE j. SVC ANNEX CODES k. MSO (YYWW)  DATE c. PAY ENTRY DATE (YYYYMMDD) d. MSO (YYWW) e. AD/RC OBLIGATION  (6) g. PAY GRADE h. DATE OF GRADE (YYYYMMDD) i. ES j. YR ED  PEF n. T-E MOS/AFS o. PMOS/AFS p. YOUTH q. OA  ER TO (UIC)  7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 2  2 33 34 35 36 37 38 39 40 41 42 43 44 45 46 4	EF  I. AD OBLIGATION (YYWW)  (YYMMWWDD)  SJ/HIGHEST OFR COMPL  I. STATE GUARD  2 23 24 25
17. DEP ENLISTMENT DATA  a. DATE OF ENLISTMENT - DEP (YYYYMMDD)  g. T-E MOS/AFS   h. WAIVER (2) (3) (4) (1)  18. ACCESSION DATA  a. DATE OF ENLISTMENT (YYYYMMDD)  f. WAIVER (2) (3) (4) (5) (1)  k. RECRUITER IDENTIFICATION   l. STN ID   m.  s. SVC ANNEX CODES   t. REPLACES ANNEXES   u. TRANSFE    19. SERVICE   1   2   3   4   5   6   7    REQUIRED   CODES   26   27   28   29   30   31   32	(5) (6) i. PAY GRADE j. SVC ANNEX CODES k. MSO (YYWW)  DATE c. PAY ENTRY DATE (YYYYMMDD) d. MSO (YYWW) e. AD/RC OBLIGATION  (6) g. PAY GRADE h. DATE OF GRADE (YYYYMMDD) i. ES j. YR ED  PEF n. T-E MOS/AFS o. PMOS/AFS p. YOUTH q. OA  ER TO (UIC)  7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 2  2 33 34 35 36 37 38 39 40 41 42 43 44 45 46 4  2 63 64 65 66 67 68 69 70 71 72 73 74 75 76 7	EF  I. AD OBLIGATION (YYWW)  (YYMMWWDD)  S./HIGHEST GR COMPL  I. STATE GUARD  2 23 24 25  7 48 49 50  7 78 79 80
17. DEP ENLISTMENT DATA  a. DATE OF ENLISTMENT - DEP (YYYYMMDD)  g. T-E MOS/AFS   h. WAIVER (2) (3) (4)  18. ACCESSION DATA  a. DATE OF ENLISTMENT (YYYYMMDD)  f. WAIVER (2) (3) (4) (5)  f. WAIVER (2) (3) (4) (5)  k. RECRUITER IDENTIFICATION   I. STN ID   m.  s. SVC ANNEX CODES   t. REPLACES ANNEXES   u. TRANSFE    19. SERVICE   1   2   3   4   5   6   7    REQUIRED   26   27   28   29   30   31   32    51   52   53   54   55   56   57   58   59   60   61   62	(5) (6) i. PAY GRADE j. SVC ANNEX CODES k. MSO (YYWW)  DATE c. PAY ENTRY DATE (YYYYMMDD) d. MSO (YYWW) e. AD/RC OBLIGATION  (6) g. PAY GRADE h. DATE OF GRADE (YYYYMMDD) i. ES j. YR ED  PEF n. T-E MOS/AFS o. PMOS/AFS p. YOUTH q. OA  ER TO (UIC)  7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 2  2 33 34 35 36 37 38 39 40 41 42 43 44 45 46 4  2 63 64 65 66 67 68 69 70 71 72 73 74 75 76 7  2 93 94 95 96 97 98 99 100 101 102 103 104 105 106 10	EF  I. AD OBLIGATION (YYWW)  (YYMMWWDD)  S./HIGHEST GR COMPL  1. r. STATE GUARD  2. 23 24 25  7. 48 49 50  7. 78 79 80  7. 108 109 110

### PRIVACY ACT STATEMENT

**AUTHORITY:** Title 10 USC Sections 504, 505, 508, 12102; Title 14 USC Sections 351 and 632; Title 50 USC Appendix 451; and EO 9397 (SSAN).

**PRINCIPAL PURPOSE(S):** DD Form 1966 is the basic form used by all the Military Services and the Coast Guard for obtaining data used in determining eligibility of applicants and for establishing records for those applicants who are accepted.

ROUTINE USE(S): None.

**DISCLOSURE:** Voluntary; however, failure to answer all questions on this form, except questions labeled as "Optional," may result in denial of your enlistment application.

# DRAFT

#### **WARNING**

Information provided by you on this form is FOR OFFICIAL USE ONLY and will be maintained and used in strict compliance with Federal laws and regulations. The information provided by you becomes the property of the United States Government, and it may be consulted throughout your military service career, particularly whenever either favorable or adverse administrative or disciplinary actions related to you are involved.

YOU CAN BE PUNISHED BY FINE, IMPRISONMENT OR BOTH IF YOU ARE FOUND GUILTY OF MAKING A KNOWING AND WILLFUL FALSE STATEMENT ON THIS DOCUMENT.

## **INSTRUCTIONS**

(Read carefully BEFORE filling out this form.)

- 1. Read Privacy Act Statement above before completing form.
- 2. Type or print LEGIBLY all answers. If the answer is "None" or "Not Applicable," so state. "Optional" questions may be left blank.
- 3. Unless otherwise specified, write all dates as 8 digits (with no spaces or marks) in YYYYMMDD fashion. June 1, 2005 is written 20050601.

20. NAME (Last, First, Middle Initial)				21. SOCIAL SECURITY NUMBER		
		SECTION III - (	OTHER PERSONAL DATA	Α		
22. EDUCATIO	)N					
a. List all high	schools and colle	ges attended. (List dates in YYYYM	es attended. (List dates in YYYYMM format.)			
(1) FROM	(2) TO	(3) NAME OF SCHOOL	(4) LOCATION		YES	NO
		$\mathbf{D}$	AFT	٦		
		DK	$A \Gamma I$			
					YES	NO
					120	110
b. Have you e	ver been enrolled	in ROTC, Junior ROTC, Sea Cade	et Program or Civil Air Patrol?			
23. MARITAL/	DEPENDENCY ST	ATUS AND FAMILY DATA				
(If "Yes," exp	lain in Section VI, "Re	emarks.")				
a. Is anyone	dependent upon yo	ou for support?				
b. Is there any	court order or jud	gment in effect that directs you to p	provide alimony or support for chi	ldren?		
		<u>lative</u> (father, mother, brother, or si became 100% permanently disable				
iii dolloii (ii	(2) 4104 61		oa wille cerving in the runned cer	<b></b>		
d. Are you the	only living child in	your immediate family?				
04 DDEVIOUS	NAU ITADV CEDV	VICE OR EMPLOYMENT WITH TH	IF II C. COVERNMENT			
	lain in Section VI, "R	ICE OR EMPLOYMENT WITH TH emarks.")	IE U.S. GOVERNMENT			
	w or have you evei nal Guard?	r been in any regular or reserve bra	anch of the Armed Forces or in the	e Army National Guard		
b. Have you e	ver been rejected	for enlistment, reenlistment, or indu	uction by any branch of the Arme	d Forces of the United		
States?						
				1.0		
c. Are you no	w or have you ever	r been a deserter from any branch	of the Armed Forces of the United	d States?		
d. Have you ever been employed by the United States Government?						
		ou have an application pending, or		y allowance, severance		
pay, or a po	ension from any ag	gency of the government of the Unit	ted States?			
25. ABILITY T	O PERFORM MILI	TARY DUTIES				
(If "Yes," exp	lain in Section VI, "Re	emarks.")				
a. Are vou no	w or have vou ever	r been a conscientious objector? (	That is, do you have, or have you	ever had, a firm, fixed.		
		cipation in war in any form or to the				
	ver been discharge us objector?	ed by any branch of the Armed For	rces of the United States for reason	ons pertaining to being a		
CONSCIENT	ao objector:					
c. Is there any	thing which would	preclude you from performing milit	tary duties or participating in milita	arv activities whenever		
		any personal restrictions or religiou				
ae DDIIO IIO	AND ABUSE (**	Wee II explain in Continue VIII III	n			
	•	'Yes," explain in Section VI, "Remarks." ld, supplied, or possessed any naro	•	e), depressant (to include		
		nogen (to include LSD or PCP), or				
mınd-alterii	ig substance (to in	clude glue or paint), or anabolic st	eroia, except as prescribed by a li	icencea pnysician?		

27. NAME (Last, First	st, Middle Initial)						28. SOCI	AL SECURITY NUMBER
			;	SECTION IV - CERT	TFICATION			
29. CERTIFICATIO	N OF APPLICANT	(Your signat	ure in t	this block must be witnessed	by your recruiter.	)		
I understand that	I am being accepowingly false or in	pted for en acorrect, I o	listme	ent based on the inforn be tried in a civilian or	nation provide	ed by me i	n this doc	my knowledge and belief. ument; that if any of the a less than honorable
b. TYPED OR PRINT	TED NAME (Last, Fir	st, Middle	c. SI	GNATURE				d. DATE SIGNED (YYYYMMDD)
30. DATA VERIFIC	ATION BY RECRU	JITER (Enter	r descr	iption of the actual document	s used to verify th	he following	items.)	
a. NAME (X one)		•		GE (X one)			TIZENSHIP	(X one)
(1) BIRTH CERT	TIFICATE		<del>                                     </del>	(1) BIRTH CERTIFICATE		<del> </del>		ERTIFICATE
(2) OTHER (Exp				(2) OTHER (Explain)		<del></del>	(2) OTHER	
d. SOCIAL SECURIT	•	( one)	e. El	DUCATION (X one)				MENTS USED
(1) SSN CARD		,	-	(1) DIPLOMA				
(2) OTHER (Exp	olain)			(2) OTHER (Explain)				
31. CERTIFICATIO			1	( ) - ( ) - ( )		l		
directives. I further	certify that I have rall under the Uniform	not made ar	ny proi	mises or guarantees othe	r than those list	ed and sig	ned by me.	quired as prescribed by my I understand my liability to of anyone known by me to
b. TYPED OR PRINT Middle Initial)	ED NAME (Last, Firs		Y ADE	d. RECRUITER I.D.	e. SIGNATURE			f. DATE SIGNED (YYYYMMDD)
32. SPECIFIC OPT	ION/PROGRAM E	NLISTED F	OR. N	MILITARY SKILL, OR AS	SIGNMENT TO	A GEOGR	RAPHICAL	AREA GUARANTEES
				ed by Guidance Counselor, M				
(Use clear text Eng				DR	A	F	T	
				pecific military skill or assi my Enlistment/Reenlistme				c. APPLICANT'S INITIALS
33. CERTIFICATIO	N OF RECRUITER	OR ACCEP	TOR					
a. I certify that I ha	ave reviewed all info	ormation co	ntaine er for	ed in this document and, to enlistment on behalf of th that I have not made any	e United States	(Enter Bran	nch of Servic	
				ig such enlistments have lined to this document.	peen strictly co	mplied with	and any w	aivers required to effect
b. TYPED OR PRINTI Middle Initial)	ED NAME (Last, First		Y ADE	d. RECRUITER I.D. OR ORGANIZATION	e. SIGNATURE			f. DATE SIGNED (YYYYMMDD)
			S	ECTION V - RECER	TIFICATION	N		
34. RECERTIFICA	TION BY APPLICA	NT AND CO	ORRE	CTION OF DATA AT TH	TIME OF AC	TIVE DUTY	/ ENTRY	
				ument this date. That info				best of my knowledge and ded below.
b. ITEM NUMBER	c. CHANGE REQU							
d. APPLICANT				e. WITNESS				
(1) SIGNATURE		(2) DATE SI (YYYYM		(1) TYPED OR PRINTED  First, Middle Initial)	NAME (Last,	(2) RANK/ GRADE	(3) SIGNA	TURE

OF NAME (I E APARA LOS D	120.00	OCIAL CECUDITY NUMBER			
35. NAME (Last, First, Middle Initial)	30. 3	OCIAL SECURITY NUMBER			
SECTION VI	- REMARKS				
(Specify item(s) being continued by item number. Continue on separate pages if necessary.)					
DR.	AFT				
		DD FORM 1966/5 YES			
		ATTACHED? (X one) NO			
SECTION VII - STATEMENT OF NAME	FOR OFFICIAL MILITARY RE	CORDS			
37. NAME CHANGE.  If the preferred enlistment name (name given in Item 2) is not the same a prescribed by state law, and it is the same as on your social security number	as on your birth certificate, and it has n r card, complete the following:	ot been changed by legal procedure			
a. NAME AS SHOWN ON BIRTH CERTIFICATE	b. NAME AS SHOWN ON SOCIAL SECU	RITY NUMBER CARD			
and with no criminal intent. I further state that I am the same person as the	hich I am known in the community as a	a matter of convenience			
d. APPLICANT		(O) DATE CIONES			
(1) SIGNATURE		(2) DATE SIGNED (YYYYMMDD)			
e. WITNESS					
(1) TYPED OR PRINTED NAME (Last, First, Middle Initial) (2) PAY GRADE	(3) SIGNATURE				

38. NAME (Last, First, Middle Initial)	3	9. SOCIAL SECURITY NUMBER
USE THIS DD FORM 1966 PAGE ONLY IF EITHER S	ECTION APPLIES TO THE APPLICANT'S RECORD	OF MILITARY PROCESSING.
SECTION VIII - PAR	ENTAL/GUARDIAN CONSENT FOR ENLI	STMENT
40. PARENT/GUARDIAN STATEMENT(S) (Line of	ut portions not applicable)	
a. I/we certify that (Enter name of applicant)		
has no other legal guardian other than me/u (Enter Branch of Service)	as and I/we consent to his/her enlistment in	
I/we acknowledge/understand that he/she resituations. I/we certify that no promises of a training, or promotion during his/her enlisted the Armed Forces representatives concerned conduct records checks to determine his/her compensation for such service. I/we author Processing Station via public conveyance as	any kind have been made to me/us concernent as an inducement to me/us to sign this ed to perform medical examinations, other ear eligibility. I/we relinquish all claim to his/herize him/her to be transported unsupervised	ing assignment to duty, consent. I/we hereby authorize examinations required, and to er service and to any wage or to/from the Military Entrance
l/we understand that, as a member of a training unless excused by competent authorisement, he/she may be recalled to active the ready reserve, he/she may be ordered to the Congress or the President or when other combat or other hazardous situations.	reserve component, he/she must serve min ority. In the event he/she fails to fulfill the ole duty as prescribed by law. I/we further un o extended active duty in time of war or nat	oligations of his/her reserve derstand that while he/she is in ional emergency declared by
c. PARENT		
(1) TYPED OR PRINTED NAME (Last, First, Middle Initial)	(2) SIGNATURE	(3) DATE SIGNED (YYYYMMDD)
d. WITNESS		
(1) TYPED OR PRINTED NAME (Last, First, Middle Initial)	(2) SIGNATURE	(3) DATE SIGNED (YYYYMMDD)
e. PARENT	<u> </u>	
(1) TYPED OR PRINTED NAME (Last, First, Middle Initial)	(2) SIGNATURE	(3) DATE SIGNED (YYYYMMDD)
f. WITNESS		
(1) TYPED OR PRINTED NAME (Last, First, Middle Initial)	(2) SIGNATURE	(3) DATE SIGNED (YYYYMMDD)
41. VERIFICATION OF SINGLE SIGNATURE CO	DNSENT	<u> </u>