

PERSONAL DATA FORM

NAME: _____

DATE OF MARRIAGE: _____

SEX: _____

RANK: _____

MOS: _____

JOB TITLE: _____

ETS: _____

**DATE YOU LEFT
LAST DUTY STATION:** _____

DATE YOU ENTERED D.E.P. _____

**RESERVE/NATIONAL GUARD, COAST GUARD,
DATES:** _____

PRIOR SERVICE: _____

AWARDS: _____