



**DEPARTMENT OF THE AIR FORCE**

**MONTANA AIR NATIONAL GUARD  
HEADQUARTERS 120TH AIRLIFT WING  
2800 AIRPORT AVE B  
GREAT FALLS, MT 59404-5570**

DD MON YEAR

MEMORANDUM FOR OFFICER SELECTION BOARD XX-X

FROM: YOUR INFO

SUBJECT: LETTER OF INTENT

1. Request consideration for the position \_\_\_\_\_,
2. [Address specific qualifications you have for the position applied for. Highlight any pertinent information not evident in you application packet. Include applicable civilian experience that may enhance your ability to perform this mission. Include your “why I want to be an officer in the Montana Air National Guard”.]
3. [Identify when you would be available to assume this position and whether or not you are willing to work in more than one location. Provide the best day time phone number to reach you with in order for the Selecting Official to set up an interview.]

FIRST M. LAST, RANK, MTANG  
Job Title

## PERSONAL DATA

JOHNNY K. APPLICANT, SSgt, ANG

DOR: 12 Feb 2007

Comm: (123) 456-7890

Clearance: Secret

## OBJECTIVE/GOALS:

To obtain and succeed in the position a commissioned officer.

## EMPLOYMENT HISTORY

Highlight your leadership roles in your resume!

- April 2010 – Present      **Military Communications Technician, Air National Guard**  
Prepares military communications near and far to ensure only the best information is used to determine outstanding results. Trains and supervises 8 subordinates in the demanding field of military communications. Coordinates with internal and external customers to debrief military communications.
- Aug 2009 – Present      **Statistician, Military Gizmo Company**  
Creates military gizmos for every component of the military. Supports the field with research and development for the appropriate gizmos that fulfill and complete the military mission. Supervises 2 junior statisticians and a field office.
- Jun 2006 – April 2010      **Airman Duty, Air National Guard**  
Researches and completes reports. Distributes and files internal and external correspondence to identified field units. Enforces internal procedures to ensure local operations run efficiently and concerns are handled at the functional level. Assists Sergeant Duty in compiling and analyzing projects in a highly efficient manner.
- Jun 2006 – Aug 2009      **Inventory Specialist, Generic Company USA**  
Coordinates and distributes \$10,000,000 worth of inventory by using the Special Inventory Protocol (SIP) program.

## PROFESSIONAL MILITARY EDUCATION

- 19 Aug 2009      USAF NCO Preparatory Course In-Residence, Distinguished Graduate

## SIGNIFICANT AWARDS

Highlight any Leadership awards here!

- 10 Aug 2010      Honor Graduate, USAF Military Communications Technician Course

## PERSONAL INTERESTS

Highlight any sports/athletics/fitness related endeavors/accomplishments

My wife and two rambunctious children are the joy in my life. I am also completing my Master's degree and am projected to gain that in July 2013.

\*Add in any professional certifications or licenses you have obtained.

Found at <https://w20.afpc.randolph.af.mil/afqtsnet20/DODBanner.aspx>



**AIR FORCE  
PERSONNEL CENTER**

[My Stuff](#) | [Privacy & Security Policy](#) | [Contact Us](#)

## Air Force Officer Qualifying Test Scores

### Test Results

This document contains information which must be protected IAW AFI 33-332 and DOD Regulation 5400.11. Privacy Act of 1974, as amended, applies and it is For Official Use Only (FOUO).

Today: JANUARY 25, 2008

### Test Scores of APPLICANT, JOHNNY K.

Test Date	TCO	Form/Version	Pilot	Navigator	Acad Aptitude	Verbal	Quantitative
05 JAN 2008	123	ABCD	44	55	66	77	88

Note: The scores listed above are the only valid scores.

[Check another score](#)

NOTICE: For Security reasons close out all browsers when finished.

# EXAMPLE

This contains information which must be protected IAW AFI 33-332 and DOD Regulation 5400.11. Privacy Act of 1974, as Amended Applies, and it is For Official Use Only (FOUO). It must be protected as privacy act information removed prior to further disclosure.

Air Force Personnel Center, Randolph AFB, Texas 78150



OFFICIAL TRANSCRIPT  
ISSUED TO STUDENT  
IN SEALED ENVELOPE

# TRANSCRIPT

Name: JOHNNY APPLICANT

Social Security No.: 123-45-6789

Student ID No 123456

Date of Birth: June 12, 1984

Degree: Bachelor of Arts

Degree Date:

Class:

Major 1:

Concentration 1:

Minor 1:

Major 2:

Concentration 2:

Minor 2:

----- (F2Z) Fall II 2005 (cont.) -----  
Total Total Grade Grade  
Earned Earned Applied Pt Hrs Points GPA  
ses 6.00 3.00 6.00 3.00 12.00 4.000  
cum 107.00 36.00 107.00 36.00 141.00 3.916

----- (F2T) Fall II 2005 -----  
CJ313 The Law of Evidence 3.00 A  
Total Total Grade Grade  
Earned Earned Applied Pt Hrs Points GPA  
ses 3.00 3.00 3.00 3.00 12.00 4.000  
cum 110.00 39.00 110.00 39.00 153.00 3.923

----- (S1Z) Spring I 2006 -----  
CS219 Programming Fundamentals 3.00 A  
Total Total Grade Grade  
Earned Earned Applied Pt Hrs Points GPA  
ses 3.00 3.00 3.00 3.00 12.00 4.000  
cum 113.00 42.00 113.00 42.00 165.00 3.928

----- (S2Z) Spring II 2006 -----  
Transfer from DANTES  
SG483 The Civil War & Reconstruction 3.00 TR  
Total Total Grade Grade  
Earned Earned Applied Pt Hrs Points GPA  
ses 3.00 0.00 3.00 0.00 0.00 0.000  
cum 116.00 42.00 116.00 42.00 165.00 3.928

----- (UIT) Summer 2006 -----  
CJ350 Criminal Justice Mgt & Planning 3.00 A  
Total Total Grade Grade  
Earned Earned Applied Pt Hrs Points GPA  
ses 3.00 3.00 3.00 3.00 12.00 4.000  
cum 119.00 45.00 119.00 45.00 177.00 3.938

----- (F1T) Fall I 2006 -----  
CJ301 Constitutional Law in Crim Just 3.00 A  
Total Total Grade Grade  
Earned Earned Applied Pt Hrs Points GPA  
ses 3.00 3.00 3.00 3.00 12.00 4.000  
cum 122.00 48.00 122.00 48.00 189.00 3.937

----- (F2T) Fall II 2006 -----  
CJ450 Senior Seminar in Criminal Just 3.00 A  
Total Total Grade Grade  
Earned Earned Applied Pt Hrs Points GPA  
ses 3.00 3.00 3.00 3.00 12.00 4.000  
cum 125.00 51.00 125.00 51.00 201.00 3.941

----- (S1T) Spring I 2007 -----  
SD302 The Study of the Family 3.00 A  
SD315 Minority Group Relations 3.00 A  
Total Total Grade Grade  
Earned Earned Applied Pt Hrs Points GPA  
ses 6.00 6.00 6.00 6.00 24.00 4.000  
cum 131.00 57.00 131.00 57.00 225.00 3.947



OFFICIAL TRANSCRIPT  
ISSUED TO STUDENT  
IN SEALED ENVELOPE

# TRANSCRIPT

Name: Social Security No.: Student ID No.  
Date of Birth:

Degree: Degree Date: Class:  
Major 1: Concentration 1: Minor 1:  
Major 2: Concentration 2: Minor 2:

----- (S12) Spring I 2007 -----

\*\*\*\*\* TRANSCRIPT TOTALS \*\*\*\*\*

Transfer from DANIES

	SE495	SF531	SGS30	Total	Total	Grade	Grade	TRFR	Total	Park	Total	Grade	Grade	GPA
	Drug & Alcohol Abuse	Organizational Behavior	Human Resource Management											
	3.00 TR	3.00 TR	3.00 TR											
ses	9.00	0.00	9.00	0.00	0.00	0.00	0.00	0.00	83.00	0.00	83.00	0.00	0.00	0.000
cum	140.00	57.00	140.00	57.00	0.00	0.00	0.00	0.00	143.00	60.00	143.00	60.00	237.00	3.950

----- (U12) Summer 2007 -----

	CJ440	Total	Total	Grade	Grade	GPA
	Internship in Crim					
	3.00					
ses	3.00	3.00	3.00	3.00	12.00	4.000
cum	143.00	60.00	143.00	60.00	237.00	3.950

Degree: Bachelor of Science  
Awarded: 07/29/2007  
Major: Crim Justice Admin

<----- \*Designation of degree and date awarded is required on transcript

\*No online transcript printouts accepted

\*All transcripts are required in order to determine qualification of AFSC

----- Accomplishments Thgh 2007 -----

07/29/07 Summa Cum Laude

12/18/64 Dean's List

AFSC	Job Title	Training length	Location
<b>OPERATIONS</b>			
<b>AFSC</b>			
<b>Pilot</b>			
11BX	Bomber Pilot	11-15 months	Various (Depends on airframe)
11FX	Figher Pilot	11-15 months	Various (Depends on airframe)
11MX	Mobility Pilot	11-15 months	Various (Depends on airframe)
<b>Combat Systems</b>			
12BX	Bomber Combat Systems Officer	6-9 months	Various (Depends on airframe)
12FX	Fighter Combat Systems Officer	6-9 months	Various (Depends on airframe)
12MX	Mobility Combat Systems Officer	6-9 months	Various (Depends on airframe)
<b>Space, Missile, and C2</b>			
13BX	Air Battle Manager	6 months	Tyndall AFB, FL
13MX	Airfield Operation	4 months	Keesler AFB, MS
13SX	Space & Missile	6 months	Vandenburg AFB, CA
<b>Intelligence</b>			
14NX	Intelligence	5 months	Goodfellow AFB, TX
<b>Weather</b>			
15WX	Weather	2 months	Keesler AFB, MS
<b>Operations Support</b>			
16GX	Air Force Operations Staff Officer	12 months prior AF officer experience required	
16RX	Planning & Programming	12 months prior AF officer experience required	
<b>Cyber Operations</b>			
17DX	Cyberspace Operations	5 months	Keesler AFB, MS
<b>LOGISTICS</b>			
20C0	Logistics Commander	N/A	N/A
<b>Logistics</b>			
21AX	Aircraft Maintenance	14 weeks	Sheppard AFB, TX
21MX	Munitions and Missile Maintenance	60 days	Sheppard AFB, TX
21RX	Logistics Readiness	60 days	Lackland AFB, TX
<b>SUPPORT</b>			
30C0	Support Commander	N/A	N/A
<b>Security Forces</b>			
31PX	Security Forces	3 months	Lackland AFB, TX
<b>Civil Engineering</b>			
32EX	Civil Engineer	7 weeks	Wright-Patterson AFB, OH
<b>Public Affairs</b>			
35PX	Public Affairs	4 months	Ft Meade, MD
<b>Personnel Officer</b>			
38PX	Personnel	3 months	Keesler AFB, MS
<b>MEDICAL</b>			
<b>Health Services</b>			
41AX	Health Services Administrator	30 days	Ft Sam Houston, TX
<b>Biomedical Clinicians</b>			
42EX	Optometrist	2 weeks (Previous medical credentials required)	Keesler AFB, MS
42GX	Physician Assistant	2 weeks (Previous medical credentials required)	Keesler AFB, MS
<b>Biomedical Specialists</b>			
43EX	Bioenvironmental Engineer	2 weeks (Previous medical credentials required)	Keesler AFB, MS
43HX	Public Health	2 weeks (Previous medical credentials required)	Keesler AFB, MS
43PX	Pharmacist	2 weeks (Previous medical credentials required)	Keesler AFB, MS
43TX	Biomedical Laboratory	2 weeks (Previous medical credentials required)	Keesler AFB, MS
<b>Physician</b>			
44EX	Emergency Services Physician	2 weeks (Previous medical credentials required)	Keesler AFB, MS
44FX	Family Physician	2 weeks (Previous medical credentials required)	Keesler AFB, MS
44MX	Internist	2 weeks (Previous medical credentials required)	Keesler AFB, MS
<b>Nurse</b>			
46FX	Flight Nurse	2 weeks (Previous medical credentials required)	Keesler AFB, MS
46NX	Clinical Nurse	2 weeks (Previous medical credentials required)	Keesler AFB, MS
46YX	Privileged Advanced Practice Nurse	2 weeks (Previous medical credentials required)	Keesler AFB, MS
<b>Dental</b>			
47GX	Dentist	2 weeks (Previous medical credentials required)	Keesler AFB, MS
<b>Aerospace Medicine</b>			
48GX	General Medical Officer (GMO), Flt Surg	2 weeks (Previous medical credentials required)	Keesler AFB, MS
48RX	Residency Trained Flight Surgeon	2 weeks (Previous medical credentials required)	Keesler AFB, MS
48VX	Pilot-Physician	2 weeks (Previous medical credentials required)	Keesler AFB, MS
<b>PROFESSIONAL</b>			
<b>Law</b>			
51JX	Judge Advocate	9 weeks (Previous law credentials required)	Maxwell AFB, AL
<b>Chaplain</b>			
52RX	Chaplain	1 month (Previous theology credentials required)	Ft Jackson, SC
<b>ACQUISITION</b>			
65FX	Financial Management	2 months	Keesler AFB, MS

<b>USAF DRUG AND ALCOHOL ABUSE CERTIFICATE</b>		
<b>PRIVACY ACT STATEMENT</b>		
<p><b>AUTHORITY:</b> Title 10 U.S.C., Chapter 31, Sections 504, 505, 508, 513; Chapter 807, Section 8067; Chapter 833, Section 8258; Chapter 1205, Sec12201, and Executive Order 9397 (SSN), as amended.</p> <p><b>PURPOSE:</b> To determine enlistment/commissioning eligibility, and process qualified applicants. To determine classification and assignment actions after enlistment or commissioning. All documents are source documents in determining benefits/entitlements.</p> <p><b>ROUTINE USES:</b> Disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act outside the DoD as a routine use. 'Blanket Routine Uses' apply.</p> <p><b>DISCLOSURE:</b> Voluntary; however, failure to furnish personal identification information may negate the enlistment/commissioning application.</p>		
<b>SECTION I. DEFINITION OF TERMS</b>		
<p><b>ADVERSE ADJUDICATION:</b> An adverse adjudication (<i>adult or juvenile</i>) is a finding, decision, sentence, or judgment, other than unconditionally dropped, dismissed, or acquitted. If the adjudicating authority places a condition or restraint that leads to dismissal, dropped charges, or acquittal, the adjudication is adverse. Suspension of sentence, pardon, not processed, or dismissal after compliance with imposed conditions is adverse adjudication.</p> <p><b>AIR FORCE:</b> Includes active Air Force, Air Force Reserve, Air National Guard, and Air Force Academy.</p> <p><b>ALCOHOL ABUSE:</b> Alcohol use confirmed by competent medical authority that the individual is emotionally, mentally, or physically dependent on alcohol. NOTE: When not confirmed by medical authority, self-admitted alcohol use that leads to a person's misconduct or unacceptable behavior; to the impairment of work performance, physical or mental health, financial responsibility or personal relationships; must be reported during the medical examination for determination of alcohol abuse.</p> <p><b>DRUG ABUSE:</b> The illegal, wrongful, or improper use of marijuana, any narcotic substance, hallucinogens, or any illegal drug.</p> <p><b>ILLEGAL DRUGS:</b> Any drug or narcotic that is habit forming or has a potential for abuse because of its stimulant, depressant, or hallucinogenic effect. Includes, but not limited to: cocaine, crack, hallucinogens, (<i>to include lysergic acid diethylamide (LSD), phencyclidine (PCP), tetrahydrocannabinol (THC) in non-marijuana form, and others</i>), opium, morphine, heroin, dilaudid, codeine, Demerol, inhalants (<i>paint, glue, and others</i>), amphetamines (<i>speed</i>), methamphetamines (<i>ice</i>), barbiturates (<i>downers</i>) and anabolic steroids.</p> <p><b>MARIJUANA:</b> Any intoxicating organic or synthetic cannabis or tetrahydrocannabinol (THC) type substance. Organic forms from the hemp plant include marijuana, hashish and all derivatives of cannabis sativa. Synthetically, in the form of an herbal and chemical product which, when consumed mimics the effects of cannabis, includes salviadinorum or salvinorum or any product known under such names as "Spice", "Genie", "DaScents", "Zohia", "K-2", and "KO Knockout 2" or variant thereof by whatever name it may be called.</p>		
<b>SECTION II. CERTIFICATION AT TIME OF APPLICATION</b>		
<p><b>WARNING: YOU MUST BE TOTALLY HONEST IN COMPLETING THIS FORM.</b> If you are truthful now and are accepted by the Air Force, no punitive action can or will be taken against a civilian applicant as a result of any information you reveal. <b>HOWEVER, YOU ARE CAUTIONED THAT SHOULD YOU CONCEAL DRUG OR ALCOHOL ABUSE INFORMATION AT THIS TIME, AND IT IS DISCOVERED AFTER YOUR ENTRY INTO THE AIR FORCE, PUNITIVE ACTION MAY BE TAKEN AGAINST YOU BASED UPON THE FALSE INFORMATION YOU HAVE PROVIDED.</b> Such action includes, but is not limited to, elimination from training or discharge under less than honorable conditions.</p>		
<b>INITIAL YES/NO BOXES AS APPLICABLE</b>	<b>YES</b>	<b>NO</b>
I have read and understand the definition of the terms above.	<i>JKA</i>	
Have you ever used or experimented with marijuana? ( <i>Prior marijuana use is not disqualifying for enlistment or appointment, unless you are determined to be a chronic user or psychologically dependent, have been convicted or adversely adjudicated for marijuana involvement. Preservice marijuana use may render you ineligible for certain skills.</i> )		<i>JKA</i>
Have you ever experimented with, used, or possessed any illegal drug or narcotic?		<i>JKA</i>
Have you ever been a supplier or distributor of or a trafficker in marijuana, or other illegal drugs or narcotics?		<i>JKA</i>
Have you ever been treated or undergone rehabilitation for drug or alcohol abuse?		<i>JKA</i>
Have you consumed hemp seed oil or any products containing hemp seed oil in the last 45 days?		<i>JKA</i>
<b>SECTION III. STATEMENTS OF UNDERSTANDING</b>		<b>INITIALS</b>
During my medical examination I will be tested and screened for drug and alcohol abuse. I understand that any detection of drug use ( <i>including marijuana</i> ) or alcohol abuse will render me ineligible for the Air Force. I understand I will undergo further drug and alcohol screening after entry in the Air Force, and I may be discharged based on the results of such screening.		<i>JKA</i>
Service in the United States Air Force places me in a position of special trust and responsibility. Drug or alcohol abuse after this date will be considered evidence of my inability to meet the standards of behavior expected of me as a member of the Air Force. Therefore, any drug use ( <i>including marijuana</i> ) or any alcohol abuse as described above, <b>FROM THIS DATE FORWARD</b> , renders me ineligible for the Air Force.		<i>JKA</i>
Drug and alcohol abuse by members of the U.S. Air Force violates Air Force standards of behavior and conduct and will not be tolerated. If I am identified as a drug or alcohol abuser while a member of the Air Force, appropriate disciplinary or administrative action may be taken against me, to include trial by court martial or discharge under less than honorable conditions.		<i>JKA</i>
I understand that certain skill areas in the Air Force cannot be performed by persons who have abused drugs or alcohol. My unit commander will have final approval authority regarding my actual assignment to sensitive skill positions. If I am not acceptable for such duties due to information I have revealed on this form, I will be reassigned to another position in my skill or reclassified into another skill. If it is established that I have used any substance beyond that which I have indicated on this form, I understand my enlistment, commissioning, or appointment may be declared fraudulent and I may be discharged.		<i>JKA</i>
<p><b>KNOWING AND UNDERSTANDING ALL THE INFORMATION ABOVE, AND REALIZING THAT THIS DOCUMENT WILL BE USED ONLY TO DETERMINE MY ELIGIBILITY AND RECORD MY CERTIFICATION OF ELIGIBILITY, I HEREBY STATE THAT THE ABOVE INFORMATION AS TO MY PREVIOUS DRUG OR ALCOHOL INVOLVEMENT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.</b></p>		
DATE	NAME (Last, First, M.I.) AND SSN OF APPLICANT	SIGNATURE
20121212	Applicant, Johnny K. 123-45-6789	<i>Johnny K. Applicant</i>

WITNESS		
I CERTIFY THE ABOVE INDIVIDUAL SIGNED THIS CERTIFICATE OF HIS/HER OWN FREE WILL		
DATE 20121212	NAME (Last, First, M.I.) AND GRADE OF WITNESS Recruiter, Designated O. E-6	SIGNATURE <i>Designated O. Recruiter</i> Or if electronic - Click here to sign

REMARKS <div> <p><b>**If you initialled "Yes" for experimenting with marijuana on page 1 a brief statement is required here. The statement needs to include:</b></p> <ol style="list-style-type: none"> <li>How many times you experimented with marijuana</li> <li>When was the last date used</li> <li>Why you stopped</li> </ol> <p>Any marijuana use of 6 or more times will require a waiver.</p> </div> <div> <p><b>The area below is left blank until actual accession. Please do not fill for prequalification.</b></p> </div>
--

SECTION IV. RECERTIFICATION AT TIME OF ENLISTMENT, COMMISSIONING, OR APPOINTMENT		INITIALS
I have read and fully understand all the information on this form.		
I hereby state that there has been no change in my status since I originally provided this information on the date on front of this form.		
I hereby certify that I have not used any drug, including marijuana, and that I have not been in any alcohol related abuse incidents, since I originally completed this form.		
DATE	NAME (Last, First, M.I.) AND SSN OF APPLICANT	SIGNATURE
WITNESS		
I CERTIFY THE ABOVE INDIVIDUAL SIGNED THIS CERTIFICATE OF HIS/HER OWN FREE WILL		
DATE	NAME (Last, First, M.I.) AND GRADE OF WITNESS	SIGNATURE



APPLICATION FOR APPOINTMENT AS RESERVE OF THE AIR FORCE OR USAF WITHOUT COMPONENT										OMB NO. 0701-0096	
APPOINTMENT AS A RESERVE MEMBER OF THE AIR FORCE			FEDERAL RECOGNITION AND APPOINTMENT AS A RESERVE MEMBER OF THE AIR FORCE				APPOINTMENT AS A USAF MEMBER WITHOUT COMPONENT				
<p style="text-align: center;"><b>PRIVACY ACT STATEMENT</b></p> <p><i>AUTHORITY: 10 U.S.C. 591, Reserve Components Qualifications; Executive Order 9397 (SSN), as amended.</i></p> <p><i>PRINCIPAL PURPOSE: Provides necessary information to determine if applicant meets qualifications established for appointment as a Reserve (ANGUS and USAFR) or in the USAF without component. Use of SSN is necessary to make positive identification of an applicant and his or her records.</i></p> <p><i>ROUTINE USE: May specifically be disclosed outside the DoD as a routine use pursuant to 5 U.S.C. 552a(b)(3).</i></p> <p><i>DISCLOSURE: Disclosure is voluntary. If information is not provided, all further processing is terminated.</i></p>											
<p style="text-align: center;"><b>AGENCY DISCLOSURE STATEMENT</b></p> <p>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 Department of Defense, Washington Headquarters Services, Executive Services Directorate, Information Management Division, 4800 Mark Center Drive, East Tower, Suite 02G09, Alexandria, VA 22350 -3100 (0701-0096). 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.</p>											
<p style="text-align: center;"><b>INSTRUCTIONS</b></p> <p>Complete this form in two copies. Use typewriter or print clearly in ink. Sign each copy separately. Check the type of appointment, under the form title, for which you are applying. Upon termination from active duty, travel entitlements are based on the information you enter in item 6, "Home of Record (HOR)." Once recorded, the HOR may not be changed. If additional space is required, continue in item 33, "Remarks."</p>											
1. TO :							2. SPECIALTY				
3. FROM: (Last, First, Middle Initial)						4. SSN		5. DATE OF BIRTH (YYYYMMDD)			
6. HOME OF RECORD(HOR) (Include ZIP Code and 4 digit) (If a postal box include your street address)						7. PLACE OF BIRTH (City, State, Country)					
8. MAILING ADDRESS (If other than HOR, include ZIP Code and 4 digit) (If a postal box include your street address)						9. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY (Name, relationship, and address)					
10. MARITAL STATUS		<input type="checkbox"/> SINGLE		<input type="checkbox"/> MARRIED TO MILITARY MEMBER		<input type="checkbox"/> MARRIED TO CIVILIAN		<input type="checkbox"/> SEPARATED		<input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED	
11. FAMILY MEMBERS (Other than spouse, number completely dependent upon you)			12. U.S. CITIZEN		<input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, check appropriate item)		BIRTH		NATURALIZED		
IF YOU ARE U.S. CITIZEN BY OWN NATURALIZATION, STATE THE DATE, NUMBER OF CERTIFICATE, AND COURT											
13. I UNDERSTAND I AM BEING CONSIDERED FOR APPOINTMENT:											
<input type="checkbox"/> To fill an active force requirement and agree to remain on active duty for the period specified in pertinent instructions (AFIs 36-2008, 36-2011 and 36-2107).											
My geographic preference of assignment is:			I will be available to enter active duty on:			<input type="checkbox"/> I do <input type="checkbox"/> I do not		Require at least 30 days notice to enter active duty.			
<input type="checkbox"/> To fill an authorized position vacancy in the Ready Reserve.											
INITIALS		I further understand that if I have not previously incurred a military service obligation (MSO), that I will incur an MSO and I have been briefed on what my MSO will be.									
INITIALS		I have been briefed on my responsibility to participate in the Air Force Direct Deposit Program within 60 days of arrival at my first permanent duty station.									
INITIALS		I have been briefed on the contents of the application briefing item on separation policy..									
14. EDUCATION											
TYPE OF SCHOOL	NAME OF SCHOOL	DATES ATTENDED		MAJOR SUBJECT	NO. YRS COMPL	GRAD		TYPE OF DEGREE			
		FROM (YMD)	TO (YMD)			Y	N				
SECONDARY AND OTHER											
COLLEGE, POST-GRADUATE, INTERNSHIP, RESIDENCY, FELLOWSHIP, ETC.											
MILITARY											
15. OTHER SUBJECTS SPECIALIZED IN (Include certification by American Specialty Boards and date of certification)											

<b>16. PHYSICIANS ONLY</b> <input type="checkbox"/> I DO <input type="checkbox"/> DO NOT DESIRE TRAINING IN AVIATION MEDICINE					
<b>17. CHRONOLOGICAL STATEMENT OF SERVICE AND TRAINING IN ANY COMPONENT OF THE UNIFORMED SERVICES</b> <i>(Include service academies and preparatory schools, Reserve Officer Training Corps (ROTC), Officer Training School (OTS), Health Professions Scholarship (HPSP), etc.)</i>					
DATES ATTENDED		HIGHEST GRADE	ORGANIZATION <i>(Type and Service)</i>	SPECIALTY	ACTIVE DUTY OR RESERVE
FROM (YMD) TO (YMD)					
<b>18. ARE YOU CURRENTLY A MEMBER OF ANY BRANCH OF THE UNIFORMED SERVICES?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(If yes, provide branch of uniformed service)</i>				<b>19. WERE ALL DISCHARGES HONORABLE?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>20. WERE YOU EVER NONSELECTED FOR PROMOTION TO AN OFFICER GRADE IN ANY BRANCH OF THE UNIFORMED SERVICES?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(If yes, provide branch of uniformed service)</i>					
<b>21. WERE YOU SEPARATED OR ARE YOU PENDING SEPARATION FROM ANY BRANCH OF THE UNIFORMED SERVICES FOR CAUSE, OR WERE YOU SEPARATED OR ARE YOU PENDING SEPARATION FROM COMMISSIONED STATUS IN ANY BRANCH OF THE UNIFORMED SERVICES DUE TO NONQUALIFIED, NONSELECT, OR DEFERRAL PROMOTION?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(If yes, provide branch of uniformed service, reason for separation action, and date of separation, if applicable)</i>					
<b>22. HAVE YOU EVER RECEIVED SEVERANCE PAY, OR SEPARATION PAY, OR READJUSTMENT PAY, OR VOLUNTARY SEPARATION INCENTIVE(VSI) OR SPECIAL SEPARATION BENEFIT(SSB) PAY WHEN RELEASED FROM ACTIVE DUTY OR DISCHARGED FROM ANY UNIFORMED SERVICE?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO					
<b>23. HAVE YOU PREVIOUSLY MADE APPLICATION AND BEEN REJECTED FOR COMMISSIONING BY ANY COMPONENT OF THE UNIFORMED SERVICES?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(If yes, please state when and where rejected, and cause)</i>					
<b>24. HAVE YOU EVER APPLIED FOR A COMMISSION OR POSITION WITH ANY BRANCH OF THE ARMED SERVICES OR FEDERAL GOVERNMENT? IF SO, PLEASE EXPLAIN.</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(If additional space is required, continue in "REMARKS")</i>					
<b>25. CHRONOLOGICAL STATEMENT OF CIVILIAN EMPLOYMENT, INCLUDING PART-TIME POSITIONS.</b> <i>(If additional space is required, continue in "REMARKS" section)</i>					
FROM (YMD)	TO (YMD)	EMPLOYED BY <i>(Give name and address to include ZIP Code and 4 digit)</i>		FULL TIME	PART TIME <i>(Hrs per week)</i>
POSITION AND DUTIES				REASON FOR TERMINATION	
FROM (YMD)	TO (YMD)	EMPLOYED BY <i>(Give name and address to include ZIP Code and 4 digit)</i>		FULL TIME	PART TIME <i>(Hrs per week)</i>
POSITION AND DUTIES				REASON FOR TERMINATION	
FROM (YMD)	TO (YMD)	EMPLOYED BY <i>(Give name and address to include ZIP Code and 4 digit)</i>		FULL TIME	PART TIME <i>(Hrs per week)</i>
POSITION AND DUTIES				REASON FOR TERMINATION	
<b>26. HAVE YOU EVER BEEN INVOLVED, ARRESTED, INDICTED, OR CONVICTED(INCLUDING PRETRIAL DIVERSION) FOR ANY VIOLATION OF CIVIL OR MILITARY LAW, INCLUDING NONJUDICIAL PUNISHMENT PURSUANT TO ARTICLE 15 OF THE UCMJ, OR MINOR TRAFFIC VIOLATIONS?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(If yes, please explain below. List all offenses charged against you regardless of final disposition, including situations where the involvement has not been recorded locally or the record has been ordered sealed or expunged by the court.)</i>					
OFFENSE	DATE <i>(YYYYMMDD)</i>	PLACE	AGE	DISPOSITION OF CHARGE	COURT

PAGE 3 OF 4 PAGES







PRINT AND INCLUDE ALL PAGES, NOT JUST FIRST PAGE. May be more or less than 8, this is an example.  
Found at AF Portal > Virtual MPF > Record Review/Update > View/Print All Pages.

Personal Information – Print All Pages

Page 1 of 8

NAME: JOHNNY K APPLICANT RANK: SSG SSAN: 123-45-6789 DATE: 24 APR 2012

## INDIVIDUAL INFORMATION

MARITAL STATUS: MARRIED

PERSONAL EMAIL ADDRESS:

[JOHNNYAPPLICANT@GMAIL.COM](mailto:JOHNNYAPPLICANT@GMAIL.COM)

DUTY EMAIL ADDRESS:

[JOHNNYAPPLICANT@ANG.AF.MIL](mailto:JOHNNYAPPLICANT@ANG.AF.MIL)

HOME PHONE: 123-456-7890

HOME ADDRESS:

1234 APPLE DRIVE

CITY, ST 12345

MAILING ADDRESS:

1234 APPLE DRIVE

CITY, ST 12345

SEX: MALE

RACE: ASIAN, NATIVE HI/PACIFIC ISL

HISPANIC DECLARATION: NOT HISPANIC OR  
LATINO

ETHNIC GROUP: ASIAN

RELIGIOUS PREFERENCE: NO RELIGIOUS PREFERENCE

DATE OF BIRTH: 12 JUN 1984

PLACE OF BIRTH: CALIFORNIA

CITIZENSHIP: BY BIRTH IN UNITED STATES

WEIGHT MANAGEMENT:

EFFECTIVE DATE:

N/A

UNFAVORABLE INFORMATION FILE: NO UIF

CONTROL ROSTER: NOT ON CONTROL ROSTER

CONSENT TO RELEASE:

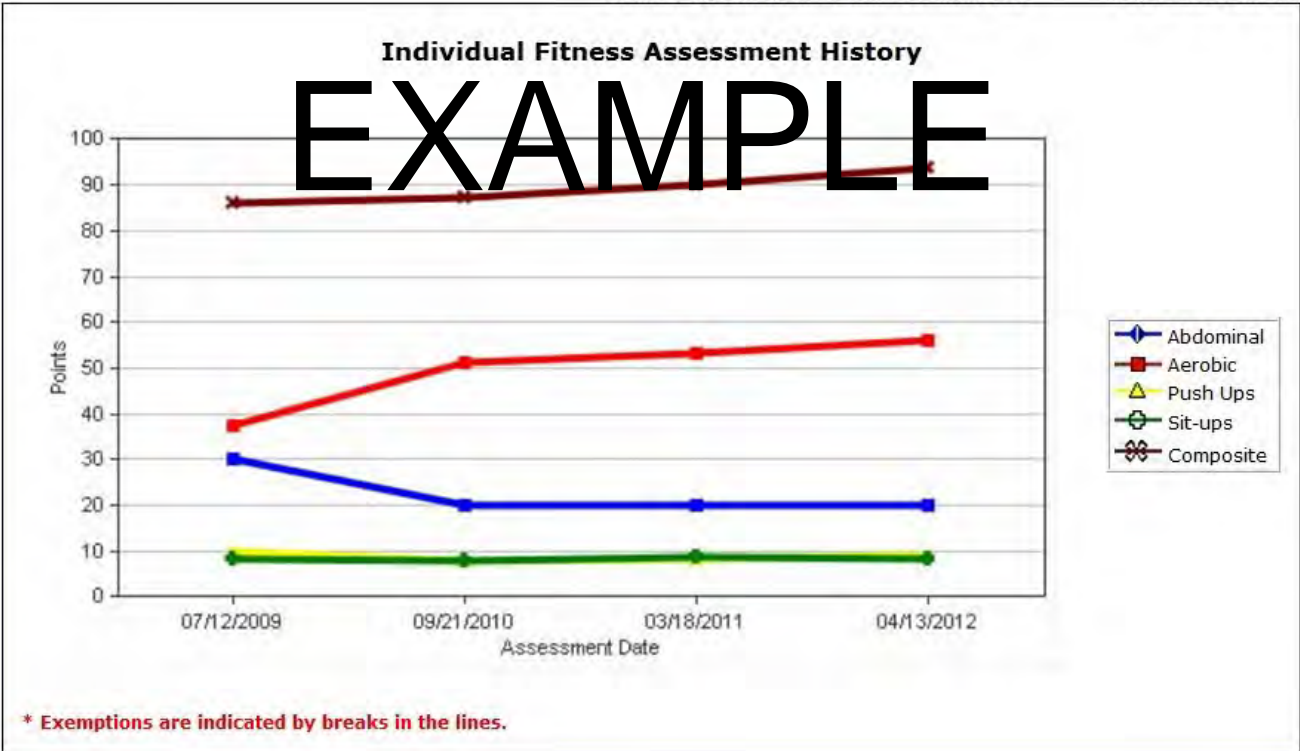
THIS DOCUMENT CONTAINS INFORMATION WHICH MUST BE PROTECTED  
IAW AFI 33-322 AND DOD REGULATION 5400.11.  
PRIVACY ACT OF 1974, AS AMENDED, APPLIES.



ANG READINESS
 Pascode: AB1CDE2
 Prepared on: 04/27/2012 at 12:06 GMT

Age	Gender	Height	Weight	BM
27	M	72"	190.0 lbs	11 kg/m
		Score	Points	Max Points
1.5 Mile Run		35	56.00	60.00
Abdominal Circumference		30"	20.00	20.00
Push Ups		45	9.20	10.00
Sit-ups		44	8.50	10.00
Test entered/changed by: FACILITATOR			<b>Total Points</b>	<b>93.7</b>
Exemption Type:			Next test due date:	<b>100.00</b>
			04/30.2013	<b>Excellent</b>
			Fitness Level	

Member Air Force fitness ranking is:
 Top 50% of the AF
 Member age and gender fitness ranking is:
 Top 50% of the AF



Individual Test History							
Name: JOHNNY APPLICANT		Rank: SSG Unit: ANG		SSAN: XXX-XX-6789			
Test Date	Cardio Results	Abdominal Circumference (in)	Push Ups	Sit-Ups	Composite Score	Fitness Level	Test Entered By
04/13/2012	35/56	30	45	44	93.7	Excellent	FACILITATOR