



SAT NAC COMPL BY DIS

1. NAME (Last, First, Middle)			2. SSN		3. DATE OF BIRTH	
4. HOME OF RECORD			5. GRADE APPOINTED		5A. CODE	5B. DATE OF RANK
City _____ County _____ State _____						
6. PLACE OF BIRTH (City, State or County)			7. MOS	8. TEMPORARY GRADE PRESENTLY SERVING		8A. CODE
9. CITIZENSHIP		9A. CODE	10. SEX	11. LSL	12. PERMANENT GRADE (For Temp. Appt. only)	12A. CODE
14. RELIGION	14A. CODE	15. RACE	15A. CODE	16. CONTRACT/LEGAL AGREEMENT	16A. CODE	17. PEBD
18. COMPONENT	A8A. CODE	19. IMMED. ASSIGN. ACDU	20. MMS SOURCE CODE	20A. AUTHORITY		20B. PROGRAM

21. PRIOR SERVICE

A. BRANCH/ COMPONENT	B. HIGHEST GRADE	C. ENL. OR APPT.			D. DISCHARGED		
		YR.	MO.	DA.	YR.	MO.	DA.
1							
2							
3							
4							
5							
6							
7							
8							
9							

COM DATE _____

TBS CLASS ASG _____

YRS FINANCIAL ASST _____

EAS/ECC _____

COM TRANS NUM _____

SPL INSTR _____

763 _____

COM _____

COVER LTR _____

ORDERS _____

MAX LEAVE _____

REPORT BY _____

COMMENTS _____

OSO/NROTC UNIT _____

T/O _____ (date) _____ (initials)