

CAUTION: NOT TO BE USED FOR IDENTIFICATION PURPOSES

THIS IS AN IMPORTANT RECORD. SAFEGUARD IT.

ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

| CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY This Report Contains Information Subject to the Privacy Act of 1974, As Amended. | | | | | |
|---|--|--|---|---------------------------|--------|
| 1. NAME (Last, First, Middle) | | 2. DEPARTMENT, COMPONENT AND BRANCH | | 3. SOCIAL SECURITY NUMBER | |
| 4a. GRADE, RATE OR RANK | b. PAY GRADE | 5. DATE OF BIRTH (YYYYMMDD) | 6. RESERVE OBLIGATION TERMINATION DATE (YYYYMMDD) | | |
| 7a. PLACE OF ENTRY INTO ACTIVE DUTY | | b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) | | | |
| 8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND CANNOT BE TRAINING ONLY (Indicating military training center) | | b. STATION WHERE SEPARATED: CANNOT BE TRAINING ONLY | | | |
| 9. COMMAND TO WHICH TRANSFERRED | | | 10. SGLI COVERAGE <input type="checkbox"/> NONE AMOUNT: \$ | | |
| 11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.) | | 12. RECORD OF SERVICE | | | |
| | | a. DATE ENTERED AD THIS PERIOD | YEAR(S) | MONTH(S) | DAY(S) |
| | | b. SEPARATION DATE THIS PERIOD | | | |
| | | c. NET ACTIVE SERVICE THIS PERIOD | min. 180 days | 6 | 1 |
| | | d. TOTAL PRIOR ACTIVE SERVICE | | | |
| | | e. TOTAL PRIOR INACTIVE SERVICE | | | |
| | | f. FOREIGN SERVICE | | | |
| | | g. SEA SERVICE | | | |
| | | h. INITIAL ENTRY TRAINING | | | |
| 13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) | | 14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) | | | |
| 15a. COMMISSIONED THROUGH SERVICE ACADEMY | | | YES | NO | |
| b. COMMISSIONED THROUGH ROTC SCHOLARSHIP (10 USC Sec. 2107b) | | | YES | NO | |
| c. ENLISTED UNDER LOAN REPAYMENT PROGRAM (10 USC Chap. 109) (If yes, years of commitment: _____) | | | YES | NO | |
| 16. DAYS ACCRUED LEAVE PAID | 17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION | | | YES NO | |
| 18. REMARKS | | | | | |
| The information contained herein is subject to computer matching within the Department of Defense or with any other affected Federal or non-Federal agency for verification purposes and to determine eligibility for, and/or continued compliance with, the requirements of a Federal benefit program. | | | | | |
| 19a. MAILING ADDRESS AFTER SEPARATION (Include ZIP Code) | | b. NEAREST RELATIVE (Name and address - include ZIP Code) | | | |
| 20. MEMBER REQUESTS COPY 6 BE SENT TO (Specify state/locality) _____ OFFICE OF VETERANS AFFAIRS | | | YES | NO | |
| a. MEMBER REQUESTS COPY 3 BE SENT TO THE CENTRAL OFFICE OF THE DEPARTMENT OF VETERANS AFFAIRS (WASHINGTON, DC) | | | YES | NO | |
| 21.a. MEMBER SIGNATURE | b. DATE (YYYYMMDD) | 22.a. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title, signature) | b. DATE (YYYYMMDD) | | |
| SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only) | | | | | |
| 23. TYPE OF SEPARATION Statements like "released from ADT" (Active Duty Training) does not qualify. | | 24. Character of Service (include upgrades) Can not be DISHONORABLE | | | |
| 25. SEPARATION AUTHORITY | | 26. Separation codes | 27. Reentry codes | | |
| 28. NARRATIVE REASON FOR SEPARATION For DD214's less than 180 days words like "expiration of term of service" or completion of required service" or words to that effect qualifies the shorter term of service as making the individual a veteran. | | | | | |
| 29. DATES OF TIME LOST DURING THIS PERIOD (YYYYMMDD) | | | 30. MEMBER REQUESTS COPY 4 (Initials) | | |