

**OFFICER APPLICATION
FOR
APPOINTMENT IN THE ILLINOIS AIR NATIONAL GUARD**
(PLEASE SEE PRIVACY ACT STATEMENT ON THE REVERSE SIDE OF THIS FORM)

POSITION APPLYING FOR:

NAME: (Last, First, MI)

SSAN:

HOME PHONE:

HOME OF RECORD: (Include Zip Code)

AGE:

DATE OF BIRTH: (DD/MM/YYYY)

PLACE OF BIRTH:(City, State, County)

MARITAL STATUS: Single

Married

Divorced

Widowed

SEX: Male

Female

U.S. CITIZEN: Yes

No

CITIZENSHIP OBTAINED BY:

Birth

Naturalization

IF YOU ARE A U.S. CITIZEN BY OWN
NATURALIZATION, STATE DATE,
NUMBER OF CERTIFICATE AND COURT

EMPLOYER: (Full Address)

JOB TITLE:

WORK PHONE: (Include Extensions, if any)

ARE YOU PRESENTLY A MEMBER OF ANY BRANCH OF
THE UNIFORMED SERVICE? Yes No

DO YOU HAVE ANY PREVIOUS MILITARY SERVICE? Yes No

BRANCH

GRADE

DOS

TOTAL YEARS

MILITARY JOB TITLE AND AFSC/MOS

HAVE YOU PREVIOUSLY MADE APPLICATION AND BEEN REJECTED FOR COMMISSION BY ANY COMPONENT OF THE UNIFORMED SERVICES?
IF YES, STATE WHEN AND WHERE REJECTED, AND CAUSE.

Yes No

WERE YOU SEPARATED FROM ANY BRANCH OF THE UNIFORMED SERVICES FOR CAUSE OR ARE YOU PENDING SEPARATION FROM COMMISSIONED
STATUS IN ANY BRANCH OF THE UNIFORMED SERVICES DUE TO DEFERRAL OF PROMOTION? IF YES, PROVIDE DATE, BRANCH OF UNIFORMED
SERVICE AND CAUSE:

Yes No

TYPE OF SCHOOL	NAME	DATES ATTENDED		MAJOR SUBJECTS	NO. YEARS COMPLETED	GRADUATE		TYPE OF DEGREE
		FROM	TO			YES	NO	
HIGH SCHOOLS						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
COLLEGE AND POST-GRADUATE INTERNSHIP RESIDENCY						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	

IF YOU DO NOT HAVE A COLLEGE DEGREE, WHEN AND HOW DO YOU PLAN TO ATTAIN ONE?

REMARKS:

HOBBIES

LIST ANY HOBBIES YOU HAVE:

LIST YOUR MILITARY EXPERIENCE IN CHRONOLOGICAL SEQUENCE

BRANCH	FROM	TO	ACTIVE/RESERVE	TYPE OF SEPARATION

CONVICTIONS/OFFENSES/CHARGES

HAVE YOU EVER BEEN INVOLVED, ARRESTED, INDICTED, OR CONVICTED FOR ANY VIOLATION OF CIVIL OR MILITARY LAW, INCLUDING NONJUDICIAL PUNISHMENT PURSUANT TO ARTICLE 15 OF THE UCMJ OR MINOR TRAFFIC VIOLATIONS? YES NO

IF YES, EXPLAIN BELOW. LIST ALL OFFENSES CHARGED AGAINST YOU REGARDLESS OF FINAL DISPOSITION INCLUDING SUCH SITUATIONS WHERE THE INVOLVEMENT HAS NOT BEEN RECORDED LOCALLY OR THE RECORD HAS BEEN SEALED OR ORDERED EXPUNGED BY THE COURT.

OFFENSE	DATE	PLACE	AGE	DISPOSITION

PILOT RATING

DO YOU HAVE A PILOTS LICENSE? YES NO TYPE OF AIRCRAFT RATINGS:

WHAT TYPE OF AIRCRAFT ARE YOU QUALIFIED ON?

IT IS UNDERSTOOD BY THE UNDERSIGNED THAT AS A MEMBER OF AN ACTIVE AIR NATIONAL GUARD UNIT I AM REQUIRED TO ATTEND THE MONTHLY UNIT TRAINING ASSEMBLIES AND ANNUAL FIELD TRAINING OF A MINIMUM OF FIFTEEN (15) DAYS EACH FISCAL YEAR, AND THAT I AM SUBJECT TO BE CALLED TO ACTIVE DUTY DURING TIMES OF WAR OR NATIONAL EMERGENCY AS DECLARED BY THE PRESIDENT OF THE UNITED STATES. FURTHER, THAT I AM PREPARED TO MEET THE ABOVE OBLIGATION AND WAIVE CLAIM TO ANY EXEMPTION OF THE ABOVE BY VIRTUE OF CIVILIAN EMPLOYMENT.

TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE INFORMATION I HAVE GIVEN IS TRUE AND CORRECT.

SIGNATURE OF APPLICANT

DATE

PRIVACY ACT: AUTHORITY: 10 U.S.C. 501, Reserve Components Qualifications. PRINCIPLE PURPOSE: Provides necessary information to determine if applicant meets qualifications established for appointment as a Reserve (ANGUS). Use of SSN is necessary to make positive identification of an applicant and his or her records. ROUTINE USE: None. DISCLOSURE IS VOLUNTARY: If information is not provided, all further processing is terminated.