

PROJECT IDENTIFY AND RECOGNIZE
Personal Data Registration Form 2009
Active Duty, Reserve, National Guard, and Veteran. (Living or Deceased)

PERSONAL INFORMATION:

Date _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (_____) _____ - _____ E-mail: _____

EDUCATIONAL HISTORY:

Institution	Degree	Date Awarded	Major/Field of Study.

Did you use your Veteran's Benefits, ROTC or other military scholarship to obtain your degree? _____

MILITARY HISTORY:

Name, if different while serving in the military: _____

Service (circle one) USA USMC USN USAF USCG

Status (circle one) Active Duty Reserve National Guard Retired from service Other _____

Highest Rank /Rating: _____

Military Experiences/Duty Assignments (use the reverse side or attach additional information)

Name of Installation	Location	Service Dates	Major Duties

Military Decorations and Awards (use the reverse side or attach additional information)

Award	Date Awarded	Reason for Award

Please enclose copy of a photo taken in uniform, personal stories, newspaper articles or information you wish to share. May we contact you for clarification of information Yes No For an interview Yes No

THE NAME ON THE CERTIFICATE OF RECOGNITION SHOULD READ: Please Print

Signature of Serviceperson OR Signature and Address of Person completing the form

MAIL FORM TO: Janett Gibbs, Project Director, 135 Meadowview Road, Athens, GA 30606
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