



Brigham Young University – Idaho

Department of Military Science



Name: _____ Gender: Male _____ Female _____

Address: _____ Phone #: _____

_____ Cell #: _____

_____ Email: _____

SSN: _____ Birth Date: _____ Age: _____

Height: _____ Weight: _____ Marital Status: M S D # of Children: _____

High School Graduate: Y N If no: Anticipated Graduation Date: _____ High School GPA: _____

College Major: _____ Minor: _____

Credits Earned: _____ Credits Currently Carried: _____ GPA: _____

Prior Service: Army Marines Navy Air Force ARNG ANG Reserves: Army Air Force Navy Marines

How Long: _____ MOS: _____ Rank: _____ Veteran(where, when): _____
