San Diego Community College District

Active Military Duty Certification

For Spouses and Dependents

❑ City ❑ Mesa ❑ Miramar ❑ ECC

In accordance with the California Education Code § 68074, the Commanding Officer or Personnel Officer of the serviceman's command is requested to furnish the following specified information from the serviceman's official military personnel record and to personally sign and affix the command seal thereto. **The serviceperson is requested to make no entries on his/her own certification form.**

Serviceperson's Home of Record: _____

This is to certify that: _____

Has been stationed at **present** duty station: _____

City: _____ State: _____ since: Month _____Day _____Year _____ and is

Expected to be at the above duty station until: Month _____ Day _____ Year _____

The Serviceperson's active duty assignment immediately **previous** to the above was:

Duty Station: _____ City: _____ Date: _____

The most recent date of enlistment or re-enlistment was: _____

Enlistment Expires: Month _____ Day _____ Year _____

Serviceperson's Spouse or Dependent Statement

Name: _____ is the spouse/dependent of the serviceperson name above.

Spouse/Dependent Social Security #: _____

Spouse/Dependent: _____ _____

Signature Date

I, the undersigned, do hereby certify the above to be true and accurate and was copied by me from the official military personnel records of the serviceperson.

Signed this date: Month _____ Day _____ Year _____

Commanding Officer or Personnel Officer: _____

Signature

Name:_____ Rank: _____

(PRINT)

Telephone: _____

Command Seal

Distribution: Campus Residency Office