



MILITARY CONNECTIONS SURVEY

Student Name _____

1. Does this student have a parent or guardian who is active duty in US Armed Forces, including those on active duty in the National Guard?
 Yes No

2. Does this student have a parent or guardian who is a member of the military reserves (US Armed Forces, National Guard, or Reserve)?
 Yes No

If the answer to Questions 1 and 2 is no, please sign at the bottom and return to school.

Please complete chart below using the following criteria:

Military Status

Active Duty, Deployed	Active Duty, Not Deployed	Discharged	Inactive	Injured	Killed in Action
Retired	Student Military Identifier Only	Transitioning out of Active Duty			

Military Branch

Air Force	Air Force Reserve	Air National Guard	Army	Army Reserve	Army National Guard
Coast Guard	Coast Guard Reserve	Marine Corps	Marine Corps Reserve		Navy
Navy Reserve	Public Health Service	Commissioned Corps of the National Oceanic and Atmosphere Administration			

Parent/Guardian Name	Relationship to Student	Military Status	Military Branch	Start Date of Service	End Date of Service
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Name of Parent/Guardian completing survey _____

Signature of Parent/Guardian completing survey _____ Date _____