

Cadet Information Sheet (Print Legibly and only in black pen, NO PENCILS)

_____		_____	_____	
Last, First, Middle Name		SSN	DOB (MM/DD/YY)	
_____		_____		_____
Local Address		City, State, Zip Code		Phone Number (xxx-xxx-xxxx)
_____		_____	_____	_____
Place of birth, (City, State)		Citizenship	Cell phone #	AKO email address (leave blank if not in military)
_____		_____	_____	_____
University Email Address		Major	Allergies	Blood Type
_____		_____	_____	_____
_____	_____	_____	_____	_____
Hair Color	Eye color	Race	JROTC	Grad Date (MM/YY) (College, i.e., 05/17)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
ACT/SAT Score	Sex	Height	Weight	Marital Status
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Military: Yes or No		ARNG or RES.		
Name of unit (Include complete address, point of contact and telephone number.)				

Home of Record Data

_____		_____	_____	_____
Home of Record Address		City	State	Zip Code
_____		_____		
Home of record phone number		Emergency point of contact (Name not phone number)		

PRIVACY ACT STATEMENT (This form is covered by the Privacy Act of 1974, Public Law 93-579. Authority for requesting personal data and the uses thereof are given below.) FORM NUMBER/TITLE/DATE. EEOCFORM 283, Intake Questionnaire, March 1984

1. AUTHORITY: 42 U.S.C. ____e-5(b), 29 U.S.C ____211, 29 U.S.C.
2. PRINCIPAL PURPOSE (S). The Purpose of this questionnaire is to solicit information to enable the Commission to avoid the intake of matters not within its jurisdiction.
3. ROUTING USES. Information provided on this form will be used by Commission employees to determine the existence of facts to relevant to a decision as to whether the Commission has jurisdiction over potential charges, complaints or allegations of employment discrimination and to provide on this form may be disclosed to other State, local and federal agencies as may be appropriate or necessary to carrying out the Commission's functions. This would include employment practices laws. Information may also be disclosed to charging parties in consideration of or in connection with litigation.
4. WHETHER DISCLOSURE IS MANDATORY OR VOLUNTARY AND EFFECT ON INDIVIDUAL FOR NOT PROVIDING INFORMATION. The providing of this information is voluntary but the failure to do so may be hamper the Commission's processing of a charge of discrimination. It is not mandatory that this form be used to provide the requested information

_____	_____
Signature	Date (MM/DD/YY)