

****PHOTO WITH RED BACKGROUND**
ID CARD FORM**

ALL INFORMATION IS REQUIRED TO CREATE YOUR CARD
Please **PRINT** - insert information below each line in the box provided:

1-STATUS

(ACTIVE) (RETIRED) (HONORARY) (COMMODORE)

2-NAME

(First, Middle I. Last)

3-EMPLOYEE ID

(Member Number - 7 Digit)

4-QUALIFICATIONS

(Basically Qualified-BQ OR AUXOP)

5-DATE OF BIRTH

(Year Month Day YYYYMMDD)

6-WEIGHT

(Pounds)

7-HEIGHT

(Inches)

8-HAIR COLOR

(Brown/Black/Blonde/Gray/White/Bald)

9-EYE COLOR

(Brown/Blue/Hazel/Green/Gray)

10-BLOOD TYPE

(O+/O-/A+/A-/B+/B-/AB+/AB-)

FLOTILLA NUMBER: 081-07-04

ADDRESS: _____ CITY: _____ ST: _____ ZIP: _____

eMail: _____ PHONE _____

Send completed form to Flotilla HR Officer who sends to Ja'Net Chatman, 8CR