ENLISTMENT / REENLISTMENT DOCUMENT ARMED FORCES OF THE UNITED STATES

PRIVACY ACT STATEMENT

<u>AUTHORITY</u>: 5 USC 3331, 32 USC 708, 44 USC 708, 44 USC 3101, and Sections 133, 265, 275, 504, 508, 510, 591, 672(d), 678, 837, 1007, 1071, through 1087, 1168, 1169, 1475 through 1480, 1553, 2107, 2122, 3012, 5031, 8012, 8033, 8496, and 9411 of 10 USC and in Executive Orders 9397, 10450, and 11652.

PRINCIPAL PURPOSES: To record enlistment or reenlistment into the U. S. Armed Forces. This information becomes a part of your military personnel records which are used to provide promotion, reassignment, training, medical support, and other personnel management actions for you. Your Social Security Number is necessary to identify you and your records, and to properly report your earnings as a member of the U. S. Armed Forces to the Social Security Administration. The data is FOR OFFICIAL USE ONLY and will be maintained in strict confidence in accordance with Federal law and regulations.

ROUTINE USES: To document your enlistment/reenlistment agreement with the U. S. Armed Forces; to record voluntary changes in your enlistment/reenlistment agreement; to determine dates of service and seniority; and for such other routine personnel management actions required to maintain normal career progression as a member of a component of the U. S. Armed Forces.

DISCLOSURE IS VOLUNTARY: How	vever, failure to furnish information w	ill result in denial of enlistment or reenlistmen	ıt.		
Α.	ENLISTEE / REENLISTEE	IDENTIFICATION DATA		and the second section	Checks and
1. NAME (Last, First, Middle)		2. SOCIAL SECURITY NUMBER			
MAGENDANZ, CHAD LEE					
3. HOME OF RECORD (Street, City, State, ZIP Code)		4. PLACE OF ENLISTMENT / REENLISTMENT (Mil. Installation, City, State,			
Boon Street, Box 376		NROTC UNIT, CORNELL UNIVERSITY			
Barneveld, NY 13304		ITHACA, NY 14853			
5. DATE OF ENLISTMENT/ REENLISTMENT (YYMMDD)	6. DATE OF BIRTH (YYMMDD)	7. PREV MIL SVC UPON ENL/REENLIST	YEARS	MONTH	S DAY
		a. Total Active Military Service	00	00	00
85 AUG 19	67 MAY 24	b. Total Inactive Military Service	00	00	00
В.	AGRE	EMENTS			
19 AUGUST 1985	this date for weeks beginning in pay grad	orEIGHT	ails of my		rs and nent /
creditable for pay purpose fulfillment of my military se	s upon entry into a pay statuervice obligation or commitmental anges in my physical or dependental.)	onpay status. I understand my periods. I also understand that this timent. I must maintain my current qual dency status, moral qualifications, and	ne is cou ifications id mailing	nted t	oward
DD FORM 2N (RESERVE).					
		es) are all the promises made to me b		ernme	nt.
(Initials of Enlistee/Reenlistee)		(Continu	ued on re	verse s	ide.)