

# FORM 11B / OTHER MILITARY SERVICE

Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

- I am a member of a military service other than the United States Armed Forces. (Complete A and B)  
 I was a member of a military service other than the United States Armed Forces. (Complete A and C)
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A. Name of State/Country/Jurisdiction: \_\_\_\_\_

Name of Military Service Body/Branch: \_\_\_\_\_

Serial/Identification Number: \_\_\_\_\_

Dates of Service From (Mo/Yr): \_\_\_\_\_ To (Mo/Yr): \_\_\_\_\_

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B. Present Rank: \_\_\_\_\_

Name of Military Service Body/Branch: \_\_\_\_\_

Present Duty Station (Name, Address, Telephone): \_\_\_\_\_

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Commanding Officer: \_\_\_\_\_

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- C. 1. Did you receive a discharge that was not an honorable discharge?  Yes  No  
2. Were you ever court-martialed?  Yes  No  
3. Were you ever awarded a non-judicial punishment?  Yes  No  
4. Were you ever allowed to resign or separate in lieu of court-martial or non-judicial punishment?  Yes  No

If you answered "Yes" to any of these questions, explain in detail the circumstances and the result, including any punishment:

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