

# CADET PERSONAL DATA ENTRY FORM

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

ID: \_\_\_\_\_ Birth Year: \_\_\_\_\_ Month: Jan Feb Mar Apr May Jun  
Jul Aug Sep Oct Nov Dec

Gender: Male Female Race: \_\_\_\_\_ Status: ACTIVE

Cross Enrolled: Yes No Home School: N/A

Alien: Yes No

Street: \_\_\_\_\_ Apartment: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: ( ) Work Phone: ( )

Home Phone Listed: Yes No E-Mail: \_\_\_\_\_

School Year: \_\_\_\_\_ Enrolled: / /  
mm/dd/yyyy

Expected Graduation Date: / / Type: Regular Special  
mm/dd/yyyy

Battalion: \_\_\_\_\_ Company: RANGER

Platoon: \_\_\_\_\_ Squad: \_\_\_\_\_

Risk Screening: / / Pre-Sports-Physical: / /  
mm/dd/yyyy mm/dd/yyyy

## PARENT/GUARDIAN INFORMATION

Relationship: \_\_\_\_\_ Legal Residence: Yes No

Street: \_\_\_\_\_ Apartment: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: ( ) Work Phone: ( )

Home Phone Listed: Yes No E-Mail: \_\_\_\_\_

Relationship: \_\_\_\_\_ Legal Residence: Yes No

Street: \_\_\_\_\_ Apartment: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: ( ) Work Phone: ( )

Home Phone Listed: Yes No E-Mail: \_\_\_\_\_