

Appendix D

LOUISIANA STATE GUARD APPLICATION

Application Information

Full Name: _____ **Highest Prior Rank:** _____
Last First M.I.

Date of Birth: _____ **SSN:** _____

Home of Record: _____
Street Address Apartment/Unit #

City State Zip Code

Phone: _____ **Email:** _____

Last Component & Unit of Assignment: _____

PEBD: _____ **Last Date of Service:** _____

Marital Status / # of Dependents: _____ (e.g. Single/0)

Attachments

Copy of DA Form 2-1 or equivalent?	YES	NO
Copy of DD 214, NGB 22 or equivalent?	YES	NO
Resume (optional if prior service)?	YES	NO
Copies of specialized degrees or certificates?	YES	NO
Copy of certificate of highest military completed?	YES	NO

Have you ever been convicted of a crime, excluding minor traffic violations, that could affect your ability to perform the duties of this position? Please explain.

YES NO

Have you ever been convicted of a DUI? YES NO

Requested Assignment:

1st Area Command – Jackson Barracks, New Orleans

3rd Area Command – Camp Beauregard, Pineville

2nd Area Command – Gillis Long Center, Carville

4th Area Command – Camp Minden

Sections available within each Area Command

____ **Chaplain Section***

____ **Medical Section***

____ **Cyber Reserve Section***

**Must include documentation verifying credentials for these sections.*

Civilian Employer: _____

Are you currently available to serve on State Active Duty if requested? YES NO

How did you hear about the Louisiana State Guard?

____ Website ____ Pamphlet/poster ____ A friend? If so, who? _____

Please list any special skills or expertise that could assist the Louisiana Army National Guard during an emergency response.

Signature

Date