

Military Discharge (DD-214)

Record Request Form

I hereby request access to the military discharge record(s) of the following individual:

(Check one)

- "I am the person of record."
- "I am a duly qualified conservator or guardian of the person of record."
- "I am a duly qualified executor or administrator of the estate of the person of record, if deceased."
- "I am the next of kin of the deceased person of record."
- "I am the attorney, attorney-in-fact or other agent or representative of:
 - a. the person of record;
 - b. the duly qualified conservator or guardian of the person of record;
 - c. the qualified executor or administrator of the estate of the person of record;
 - d. the next of kin of the deceased person of record."
- "I am a duly authorized representative of an agency or instrumentality of federal, state, or local government seeking the record in the ordinary course of performing official duties."
- "Because time is of the essence, I need to make arrangements for funeral or medical care."
- "I need access to discharge certificates or reports of separation from active duty of deceased persons for bona fide genealogical or other research purposes."

Required Applicant Information:

Name:	Photo ID #:
Address:	
	Email Address:
Signature of Applicant	Date:
State of, County of	
This instrument was acknowledged before me this day of,	
Signature of Notary Public:	
My Commission Expires:	

*A state or federal photo ID must be attached to the application. If you are the person of record no notary is required. WV Code 7-1-3LL