



# PHILLIPS UNIVERSITY MILITARY SERVICE REGISTRY

NAME \_\_\_\_\_ CLASS YEARS \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

CLUB(S) \_\_\_\_\_

OTHER STUDENT ACTIVITIES \_\_\_\_\_

OCCUPATION OTHER THAN MILITARY \_\_\_\_\_

BRANCH OF SERVICE \_\_\_\_\_

SERVICE PERIOD \_\_\_\_\_ RANK AT END OF SERVICE \_\_\_\_\_

LIST ASSIGNMENTS (FORTS, BASES, PORTS, SHIPS, AIRWINGS, ETC. PERTAINING TO YOUR BRANCH)

BRIEFLY DESCRIBE YOUR MILITARY RESPONSIBILITIES:

OVERSEAS SERVICE AND/OR COMBAT SERVICE:

AWARDS/COMMENDATIONS:

DATE OF CASUALTY/DEATH (IF APPLICABLE) \_\_\_\_\_

POW/MIA     NO     YES (IF YES, PLEASE PROVIDE DETAILS, IF DESIRED)

COMMENTS, ANECDOTES, THOUGHTS, ETC. (HOW DID YOUR ATTENDANCE AT PHILLIPS UNIVERSITY AFFECT YOUR MILITARY SERVICE OR VICE VERSA? WAS THERE A SPECIAL EVENT THAT YOU WOULD LIKE TO SHARE? IF NECESSARY, PLEASE ATTACH ANOTHER PAGE.)

IF YOU ARE SUPPLYING INFORMATION FOR SOMEONE OTHER THAN YOURSELF,  
PLEASE LIST YOUR NAME, RELATIONSHIP, ADDRESS, AND PHONE

PLEASE SEND THIS COMPLETED FORM AND YOUR PICTURE (IF DESIRED) TO:  
PUAFA  
P.O. BOX 331  
ENID, OK 73702