

PART 1: To be completed by the Applicant	
Applicant Name:	Applicant Student ID Number (if applicable):

Applicants who have served (or are currently serving) as one of the following: Active or reserve members of the United States Military, Veterans of the United States Military and AmeriCorps or Peace Corps Volunteers will need to submit this service member experience documentation form. This form must be filled out completely and uploaded to the applicant’s NCAS online application by 8:59pm PST (11:59pm EST) on February 15, 2024. Documentation submitted after that date and time will not be considered.

The service member experience documentation form will not be accepted without a commanding officer (for active Military Members), or supervisor signature.

**Military Veterans:** The DD214 member 4 copy requirement will serve as the authorized signature.

PART 2: To be completed an authorized member of the service branch	
Please Select the Organization:	
<input type="checkbox"/> U.S. Military	
Commanding Officer/Coordinator/Supervisor Name:	
Contact Phone:	Email Address:
Please list the applicant’s dates of service:	
Start Date:	End Date:
<b>Total number of hours completed:</b>	
<b>All hours must be complete by the end of Fall Term prior to the application deadline.</b>	
Please provide a brief description of duties performed while providing services for your organization. Military Veterans will also need to submit their DD214, member 4 copy. Attach a position description if desired.	

I verify the above identified applicant’s service member experience and hours are complete and accurate. The accrued service member hours have been calculated through the end of fall term 2023 (December 16, 2023). CCC reserves the right to contact anyone listed on this form to verify that this information is true and correct.

Note to applicant: Providing false information on this form will result in nullification of application and/or dismissal from the program.

**Authorized Organization Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**This form must be uploaded to your NCAS Application.**