

# Michigan Volunteer Defense Force Personnel Application

**Mail Via US Postal Service To:**

**Department of Military and Veteran Affairs  
Michigan Volunteer Defense Force  
Post Office Box 26245  
Lansing, MI 48916**

**Submitted by: (Print full name) \_\_\_\_\_**

**1. By my signature hereon I freely indicate without coercion my interest in serving in the Michigan Volunteer Defense Force. I understand and hereby agree that criminal background checks are to be conducted and by my signature hereon authorize the Michigan Volunteer Defense Force to initiate reviews and maintain records thereof.**

**2. By providing the requested personal information, completing the oath of office prior to my becoming an officer or enlisted member, and by my signature hereon should I be so appointed, I certify that the information I have provided herein to be true and factual. I also understand that I retain the right to resign unless ordered to or on active state duty and the Volunteer Defense Force retains the right to discontinue my services.**

**3. The following signature hereon indicates that I have read and understand the above two statements and I desire to sign this document on the date as listed by me hereon.**

**Signature \_\_\_\_\_ Date \_\_\_\_\_**

**Section II: Complete following Information for MSP Background Review**

**1. Michigan Drivers License Number \_\_\_\_\_**

**2. Social Security Number \_\_\_\_/\_\_\_\_/\_\_\_\_ Date of Birth \_\_\_\_\_**

**3. Prior Military Service \_\_\_\_\_ Dates \_\_\_\_\_**

**Rank \_\_\_\_\_ Current Military Status \_\_\_\_\_**

**Military Specialty or Schools: \_\_\_\_\_**

\_\_\_\_\_

**Notice:** State laws require that all applications be considered without regard to race, religion, color, sex or national origin. The Volunteer Defense Force fully supports equal opportunity and will fulfill our obligation to the fullest.

# Michigan Volunteer Defense Force Personnel Application

Full Name \_\_\_\_\_

Address \_\_\_\_\_

City/ZIP \_\_\_\_\_ County \_\_\_\_\_

Telephone No. \_\_\_\_\_ Email Address \_\_\_\_\_

Previous Address \_\_\_\_\_

Sex \_\_\_ Race \_\_\_ Place of Birth \_\_\_\_\_ Citizenship \_\_\_\_\_

Weight \_\_\_\_\_ Height \_\_\_\_\_ Hair Color \_\_\_\_\_ Eye Color \_\_\_\_\_ Marital Status \_\_\_\_\_

Have you: Been bonded? \_\_\_\_\_ Been convicted of a Crime? \_\_\_\_\_ Explain: \_\_\_\_\_

\_\_\_\_\_

Do you have a physical handicap or illness that could limit your duties? Explain:

\_\_\_\_\_

**Educational Achievement (include school/college, major, degree, and year graduated)**

**1. High School:**

\_\_\_\_\_

**2. College Degree:**

\_\_\_\_\_

**3. Graduate Degree:**

\_\_\_\_\_

**4. Additional:**

\_\_\_\_\_

**5. Additional:**

\_\_\_\_\_

**Civilian Work Experience (specialty, title, years served, and/or number supervised):**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Prior Military Applicants: Attach most recent DD-214 to this completed application.**

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