MCoE, Henry Caro NCO Academy
6610 Wilkin Drive, Building 74
Ft Benning, GA 31905

STUDENT PERSONNEL DATA SHEET

ROSTER #_____
(If Applicable)

1. **LAST NAME:** _____ **FIRST NAME:** _____
2. **MIDDLE NAME:** _____ **SUFFIX(Jr./III):** _____
3. **ENTERPRISE EMAIL ADDRESS:** _____
4. **SOCIAL SECURITY NUMBER:** _____ **DOD ID#:** _____
5. **SERVICE COMPONENT:** OTHER **PMOS:** _____ **GT SCORE:** _____ **PROFILE:** PERM
6. **RANK:** MSG **DOR:** _____ **SECUTIRY CLEARANCE:** OTHER
7. **SEX:** FEMALE **DOB:** _____ **AGE:** _____ **RACE:** HISPANIC
8. **PROMOTION POINTS:** _____ **PROMOTION POINT CUTOFF:** _____
9. **CLASS NUMBER:** 010 **COURSE:** MSLC **COLLEGE DEGREE:** DOCTORAL
10. **STUDENT MAILING ADDRESS:** _____
11. **STUDENT CONTACT NUMBER:** _____

COMPLETE UNIT NAME (DO NOT ABBREVIATE)

COMPANY: _____ **BATTALION:** _____

BATTALION CSM (LAST/FIRST NAME & EMAIL) _____

BRIGADE/REGIMENT: _____

BRIGADECSM (LAST/FIRST NAME & EMAIL) _____

INSTALLATION: _____ **STATE & ZIP CODE:** _____

1SG'S NAME (LAST/FIRST NAME & EMAIL): _____

1SG'S PHONE NUMBER: _____ (This number will be used to contact 1SG at any hour of the day.)

CDR'S NAME (LAST/FIRST NAME & EMAIL): _____

CDR'S PHONE NUMBER: _____ (This number will be used to contact 1SG at any hour of the day.)

BLC STUDENTS MUST BE ASSIGNED A SPONSOR (E-5 OR ABOVE)

SPONSOR (RANK LAST/NAME & EMAIL): _____

SPONSOR CELL NUMBER: _____ **WORK NUMBER:** _____

Controlled Unclassified Information (CUI)
Prescribed by: GSA/ISOO Authority: 32 CFR 2002
Routine Uses: The information will be used to verify Student data in ATRRS and for submission of course results to HRC. Providing the information is voluntary. Individuals not providing the requested information prevents the Academy from verify the information and enrollment into the course cannot be completed.