

**FORM M16**



**Military Service**  
For use in conjunction with Question #29

Name: \_\_\_\_\_  
SSN: \_\_\_\_\_

Yes  No  1. As a member of the armed forces were any court martial charges made or proceedings instituted against you? If so, state the nature of the charge, the date, the location and designation of the military unit where such proceedings took place and the disposition of the matter.

Yes  No  2. As a member of the armed forces was any non-judicial punishment imposed upon you? If so, state the nature of the offense, the date, the location and designation of the military unit or command imposing such punishment and the punishment imposed.

Yes  No  3. As a member of the armed forces were you asked to resign or given the opportunity to resign in lieu of judicial or administrative proceedings being instituted against you? If so, state the nature of the proceeding which was or would have been instituted against you, the date of your resignation, and the designation of the military unit or command which instituted or would have instituted proceedings against you.

Yes  No  4. As a member of the armed forces have you ever received a medical discharge or an administrative discharge for medical reasons? If so, state the medical reasons for the discharge, the name and address of the medical facility certifying the need for such discharge and the date of your discharge.

For active and reserve personnel only: Active  Reserve

Present duty station: \_\_\_\_\_  
Address: \_\_\_\_\_  
Name of Commanding Officer: \_\_\_\_\_