

SHIP OR STATION:

SUBJECT:

PERMANENT

TEMPORARY

AUTHORITY (IF PERMANENT):

**NSIPS/ESR CERTIFICATION**

SUBMIT THIS FORM TO THE NSIPS/ESR SUPERVISOR FOR ENTRY AND/OR VERIFICATION IN NSIPS. THE NSIPS SUPERVISOR MUST COMPLETE THE INFORMATION BELOW AND SUBMIT TO THE MEMBER'S OFFICIAL RECORD FOR PERMANENT ENTRIES. (NOT APPLICABLE TO NEW ACCESSION APPLICANTS)

ENTERED AND VERIFIED IN ELECTRONIC SERVICE RECORD:

VERIFYING OFFICIAL RANK OR GRADE/TITLE:

DATE:

SIGNATURE OF VERIFYING OFFICIAL:

**SERVICE MEMBER INFORMATION**

NAME (LAST, FIRST, MIDDLE):

SOCIAL SECURITY NUMBER:

BRANCH AND CLASS: