

APPLICATION FOR COAST GUARD
CIVILIAN IDENTIFICATION CARD

NAME: _____
First, middle initial, last name (please print clearly)

SSN: _____ **CIVILIAN GRADE:** _____

UNIT: _____ **DATE HIRED:** _____

DATE OF BIRTH: _____ **HEIGHT:** _____ **WEIGHT:** _____

HAIR COLOR: _____ **EYE COLOR:** _____ **GENDER: MALE OR FEMALE**

SIGNATURE: _____ **DATE:** _____

COMMAND ENDORSEMENT _____ **DATE:** _____

FROM: _____
(Unit Commanding Officer)

TO: CG INTERGRATED SUPPORT COMMAND HONOLULU PASS & ID OFFICE

1. I hereby certify that the above civilian is employed in the Coast Guard and is assigned to this unit.

2. Expected expiration of contract or hire date: _____

(PLEASE PRINT RANK, FIRST NAME, MI, LAST NAME)
SIGNATURE OF COMMAND REPRESENTATIVE