



# CULLMAN COUNTY COMMISSION

## Military / Education Verification Form

Employee Name: \_\_\_\_\_ Employee #: \_\_\_\_\_

Department: \_\_\_\_\_ Hire Date: \_\_\_\_\_

### **Military Service** (Copy of DD Form 214, 215, 256, NGB Form 22 or Military ID is required)

Branch of Service: \_\_\_\_\_ Dates of Duty: From \_\_\_\_\_ To \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

### **Education** (Official Transcript or copy of Degree from accredited institution is required)

College/University: \_\_\_\_\_ Course of Study: \_\_\_\_\_

Type of Degree (Associate, Bachelors, etc.) and Major: \_\_\_\_\_

Date of Graduation (Mo/Yr): \_\_\_\_\_

College/University: \_\_\_\_\_ Course of Study: \_\_\_\_\_

Type of Degree (Associate, Bachelors, etc.) and Major: \_\_\_\_\_

Date of Graduation (Mo/Yr): \_\_\_\_\_

College/University: \_\_\_\_\_ Course of Study: \_\_\_\_\_

Type of Degree (Associate, Bachelors, etc.) and Major: \_\_\_\_\_

Date of Graduation (Mo/Yr): \_\_\_\_\_

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Elected Official/Department Head Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date Entered in Payroll

\_\_\_\_\_  
By (Personnel Signature)