



Operation Welcome Home Information Request

Name and rank of Honoree _____

Town of Gilbert Resident (y or n) _____ Town of Gilbert Employee (y or n) _____

Branch of Service

Army _____ Navy _____ Air Force _____ Marines _____ Coast Guard _____ Merchant Marines _____

Current Military Status

Active _____

National Guard _____

Reserves _____

Honorable Discharge (date) _____

Retired (date) _____

Education

High School: _____ Graduation Date: _____

College: _____ Graduation Date: _____

Military biography

Date joined the military: _____

Date completed basic training: _____ Location: _____

Advanced Training

Date: _____ Location: _____

Duty assignments (chronologically)

Date: _____ Location: _____

Duties: _____

Date: _____ Location: _____

Duties: _____

Date: _____ Location: _____

Duties: _____

Deployments (chronologically)

Date: _____ Location: _____

Duties: _____

Date: _____ Location: _____

Duties: _____

Date: _____ Location: _____

Duties: _____

Promotions

Rank: _____ Date : _____ Rank: _____ Date : _____

Rank: _____ Date : _____ Rank: _____ Date : _____

Rank: _____ Date : _____ Rank: _____ Date : _____

Rank: _____ Date : _____ Rank: _____ Date : _____

Certificates/Awards/Decorations received while in military:

Individual Filling out form: _____ Relationship: _____

Address of honoree: _____

Contact Phone: _____ Contact email: _____