



DEPARTMENT OF THE ARMY  
ORGANIZATIONAL NAME/TITLE  
STANDARDIZED STREET ADDRESS  
CITY STATE 12345-1234

OFFICE SYMBOL

Date

MEMORANDUM FOR Commandant, Fort McCoy Noncommissioned Officer Academy,  
1361 South O. Street, Fort McCoy, WI 54656-5127

SUBJECT: Favorable Security Clearance Verification

1. NAME: Last Name, First Name, MI  
SSN:  
POB:  
DOB:  
Date/Type of Investigation:  
Date/Clearance:

NOTE: Please state the result of the investigation (Granted, No Determination Made, Denied).

2. The point of contact for this memorandum is the undersigned at commercial (xxx) xxx-xxxx or email at .mil@mail.mil.

First Name MI. Last Name  
Rank, USA  
Security Manager