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.

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| --- | --- |
|  | First Name MI. Last Name |
|  | Rank, USA |
|  | Security Manager |