AMIM-CAH-E

Fort Hood ESD Memorandum Request

Please complete this form in its entirety! Missing information will cause delays.

1. Date: _____

2. SM full name & rank (first name, middle initial, last name; your name MUST appear as it does in your military record):

_____

3. Name listed on college transcript(s) (if different than the name listed above):

_____

4. List the names of ALL the colleges we will receive transcripts from and if they will be received electronically or in person:

_____

_____

_____

Total # of transcripts: _____

- **When requesting a civilian education memo, SMs currently enrolled in college must provide one single, consolidated transcript from their current college. Soldiers not currently enrolled in college may submit multiple transcripts for review.**

5. SM email address (mil email address preferred due to PII):

_____

6. SM phone #: _____

7. DoD ID #: _____

8. Which memo are you requesting?

_____ **Civilian Education** Used to update your civilian education level in IPPS-A.

_____ **OCS Memo** Used for OCS packets/applications.

- **Electronic transcripts must be official transcripts sent directly from the online service to the ESD org box or to your personal email address, then forwarded to the ESD org box. Please send electronic transcripts to: usarmy.hood.id-wh.mbx.dhr-esd-counseling@army.mil.**

- **Once we receive ALL the transcripts listed above and the memo request form (via email), we will assign your memo to an Education Counselor. You will receive an email when your memo has been assigned to an Education Counselor.**

- **Your memo will be completed within 4 BUSINESS DAYS of the day you receive a message saying it has been assigned to an Education Counselor (that day serves as day zero). We will upload a**

digital copy of the memo and your transcripts to your ArmyIgnitED student record. You may also pick up a hard copy of the memo and your transcripts at the front desk. Your completed memo and transcripts will be held at the front desk for 30 days before being shredded due to PII.

_____ **Initial after reading the entire memo request form.**

FOR OFFICE USE ONLY

Accepted by (Reception Staff Member): _____

Assigned to (Counselor): _____

Date assigned to Counselor: _____