## **Ceremony Information Sheet**

Month attending Po	st Retiremen	t Ceremo	ny:			
Rank:	Full Name:					
Unit:		Last	Suffix		First	Full Middle
	ent: Date Entered Service: Years					
Combat Tours: Loca	ations/# of to	urs:				
Overseas PCS Tours	: Locations/#	of tours:				
Awards: (list numbe	er of awards b	elow):				
DSM SS	PH	BSM		MSM	ARCOM	AAM
Joint Awards: DMS	M JS	CM	JSAM	_ Others	:	
Retirement Award:		Supervis	or/ S-1/G-1 P	OC email for	award:	
Spouse Full Name:						Attending:
Full Name of Children for certificates:						Attending:
						Attending:
						Attending:
						Attending:
						Attending:
Retirement Address	:					
Personal Cell:						
Personal E-mail:						

Please have a current DA Photo or Retirement photo from VIOS for the Retirement Ceremony Program.

Attention: Please contact **Mr. Howard Gleason at Executive Services Division at (502) 624-7838** NLT than the **FIRST WEEK** of the month of your ceremony to conduct your final coordination.