

## REQUEST FOR DD214

Generally the Mississippi Open Records Act permits access to a variety of information. However, such access is denied when it would be contrary to any State or Federal statute or regulation. (Miss. Code Ann., Section 25-61-11 (1972)). Although the Mississippi State Veterans Affairs Board is authorized to maintain the DD 214's of members of the military, who have separated from service, federal law restricts access to such personnel, medical or similar files. Copies of DD 214's are available to Veterans and next-of-kin of deceased Veterans. Next-of Kin are the widow or widower, son or daughter, father or mother, brother or sister of the deceased Veteran. Authorized third party requestors, e.g., lawyers, doctors, historians, etc., must submit request for copies of a DD 214 from individual records with the Veteran's (or next-of-kin's) signed and dated authorization.

1. NAME USED DURING SERVICE (last, first and middle)		
2. SOCIAL SECURITY NO.	3. DATE OF BIRTH	4. PLACE OF BIRTH
5. SERVICE NO.	6. BRANCH OF SERVICE	7. DATE OF SERVICE (date entered, date released)
8. HOME OF RECORD ON DISCHARGE		
9. IS THIS PERSON DECEASED? If "YES" enter the date of death. <input type="checkbox"/> NO <input type="checkbox"/> YES _____		
<b>PERSON REQUESTING DOCUMENT:</b>  Name: _____  Address: _____ _____  Daytime Telephone: _____  Relationship to veteran (if veteran is deceased) _____ (surviving spouse, child, parent, sibling) <b>Must present proof by either: birth certificate, marriage license, death certificate, power of attorney or conservatorship, or published obituary.</b>	<b>PLEASE SEND DOCUMENT TO:</b>  Name: _____  Address: _____ _____  Phone: _____  Fax: _____  Email: _____	
<b><u>AUTHORIZATION</u></b>		
<b>I hereby authorize the Mississippi State Veterans Affairs Board to release the requested information. I further state that all information I have provided on this form is true and accurate to the best of my knowledge.</b>		
Signature of Requestor	Date	