

# REQUEST FOR

## JOINT SERVICES TRANSCRIPT

# OFFICIAL

# JST

# OFFICIAL

Complete Form, Provide Signature, then Mail or Fax to:

COMMANDING OFFICER

**NETPDTC**

ATTN: **JST Technology Operations Center**  
**6490 Saufley Field Road**  
**Pensacola, FL 32509**

FAX TO: (850) 473-5694

Questions on JST contact the **JST Technology Operations Center** at: [jst@doded.mil](mailto:jst@doded.mil)

INFO on JST and other Voluntary Education Programs go to web site: <https://jst.doded.mil>

Signature (NOTE: Must have signature in order to process!)

Date

### PRIVACY ACT INFORMATION - PLEASE TYPE OR PRINT LEGIBLY

"For Official Use Only - Privacy Sensitive - Any misuse or unauthorized disclosure may result in both civil and criminal penalties."

1. NAME <small>(Last, First, Middle Initial) Name on Military Records</small>		2. SSN <small>(Last FOUR of SSN Only)</small>	
3. RATE / RANK	5. BRANCH OF SERVICE <small>(Check One)</small>	<input type="checkbox"/> Navy	<input type="checkbox"/> Other <small>(Specify)</small>
		<input type="checkbox"/> Marine Corps	<input type="text"/>
6. Currently on Active Duty?		7. How do we CONTACT you?	
<input type="checkbox"/> YES		Work Phone: <small>(DSN if available)</small>	
<input type="checkbox"/> NO		Alternate Phone:	
		E-Mail:	

8. PERSONAL (Unofficial) COPY Go to the following Web Site to generate and print your personal copy of the JST.  <a href="https://jst.doded.mil">https://jst.doded.mil</a>	9 SEND <b>OFFICIAL</b> JST TO THE FOLLOWING EDUCATIONAL INSTITUTION <small>NOTE: Official JSTs cannot be sent to individuals or Military Education Centers. <b>No Abbreviations Please</b></small>	
	Name of Educational Institution:	<input type="text"/>
	Address:	<input type="text"/>
	City, State:	<input type="text"/>
	Zip Code:	<input type="text"/>

### DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY	10 USC, Section 4302
PRINCIPAL PURPOSES	To enable the JST system to access its computerized files, retrieve data, and produce a transcript for forwarding to educational institutions designated by the individual.
DISCLOSURE	Voluntary. Failure to provide required information will complicate, delay, and/or prevent administrative actions needed to produce the Transcript and forward it to desired educational institution(s).
ELIGIBLE	1. Active Duty and Reserve Sailors / Marines 2. Navy & Marine Corps Veterans