

## PARENTAL OR GUARDIAN CONSENT FOR ENLISTMENT

APPLICANT'S NAME \_\_\_\_\_ SSN \_\_\_\_\_  
(LAST) (FIRST) (MI)

ADDRESS: \_\_\_\_\_  
(STREET, ROAD, ROUTE) (CITY) (STATE) (ZIP)

I / we certify that the applicant named herein has no other legal guardian than me /us and I / we consent to his / her enlistment in the OHIO MILITARY RESERVE subject to all the requirements and lawful commands of the officers or non-commissioned officers who may, from time to time, be placed over him / her: and I / we certify that no promise of any kind has been made to me / us concerning assignment to duty, or promotion, during his / her enlistment as an inducement to me / us to sign this consent document. I / we hereby authorize the OHIO MILITARY RESERVE representative concerned to arrange for medical examination and to conduct records checks to determine the applicants's eligibility. I / we relinquish all claim to any wage or other compensation for his / her OHIO MILITARY RESERVE service.

I / we further certify that the applicant's birth date is \_\_\_\_\_  
(DAY) (MO) (YEAR)

DATE \_\_\_\_\_ (SIGNATURE) \_\_\_\_\_ (RELATIONSHIP)  
(DAY) (MO) (YEAR)

DATE \_\_\_\_\_ (SIGNATURE) \_\_\_\_\_ (RELATIONSHIP)  
(DAY) (MO) (YEAR)

### WITNESS ATTESTMENT

I testify the above statement has been read and explained to the parents(s) or guardian of the applicant.

RECRUITING AND RETENTION OFFICER:

NAME \_\_\_\_\_ GRADE \_\_\_\_\_ BRANCH \_\_\_\_\_  
(LAST) (MIDDLE) (MI)

OHMR UNIT ASSIGNMENT \_\_\_\_\_  
(COMPANY) (BATTALION) (BRIGADE) (DETACHMENT OR UNIT)

DATE \_\_\_\_\_ (SIGNATURE) \_\_\_\_\_  
(DAY) (MO) (YEAR)

### ENDORSEMENT OF COMMANDING OFFICER

The enlistment of the applicant is APPROVED [ ] DATE \_\_\_\_\_  
(DAY) (MO) (YEAR)

ENCLOSURES	SIGNATURE
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OHMR UNIT DESIGNATION	TYPED NAME AND GRADE
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