

REQUEST FOR
JOINT SERVICES TRANSCRIPT

OFFICIAL

JST

OFFICIAL

Complete Form, Provide Signature, then E-Mail to:

E-mail: usarmy.knox.hrc.mbx.tagd-aarts@mail.mil

Questions on JST can be directed to the above address as well, or you may call Toll Free:
1-888-276-9472

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

(Last, First, Middle Initial)
Name on Military Records

2. SSN

(Last FOUR of SSN Only)

3. RATE / RANK

5. BRANCH OF SERVICE
(Check One)

☐ Army

☐

6. Currently on Active Duty?

☐ YES

☐ NO

Work Phone:
(DSN if available)

Alternate Phone:

E-Mail:

8. PERSONAL

(Unofficial) COPY

Go to the following
Web Site to generate and
print your personal copy
of the JST.

<https://jst.doded.mil>

9 SEND OFFICIAL JST TO THE FOLLOWING EDUCATIONAL INSTITUTION

NOTE: Official JSTs cannot be sent to individuals or Military Education Centers. **No Abbreviations Please**

Name of Educational
Institution:

Address:

City, State:

Zip Code:

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 Army / National Guard
2. Army Veterans