



State of Wisconsin

Department of Corrections

CORRECTIONAL OFFICER APPLICATION MATERIALS

Job Announcement Code 04-66500

Return completed materials to:

**Department of Corrections
BPHR (Officer Selections)
3099 East Washington Avenue
PO Box 7925
Madison, WI 53707-7925**

www.wi-doc.com

Jim Doyle
Governor

Rick Raemisch
Secretary



State of Wisconsin Department of Corrections

Mailing Address

3099 E. Washington Ave.
Post Office Box 7925
Madison, WI 53707-7925
Telephone (608) 240-5509
Fax (608) 240-3343

Dear Applicant:

Thank you for your interest in the position of Correctional Officer with the Wisconsin Department of Corrections. The first step in the hiring process is for you to complete and return the enclosed application materials. If your application materials are received in this office by the date indicated on the schedule, and you meet the minimum requirements, you will be scheduled for a multiple-choice test and interview. If you are selected following the interview process you will be scheduled for a medical examination and a physical fitness test. All applicants who pass the physical fitness test will be placed on the employment register for the next two training classes and will be contacted when a vacancy occurs and the date to begin preservice training. Applicants on the register who do not begin either of the next two training classes will be removed from the register and will be required to reapply if still interested in the position.

The attached schedule provides you with all of the applicable dates during this process, which include: Application deadline, Interview dates, Medical/Fitness dates, and Class start date.

Applicants for the position of Correctional Officer must be at least 18 years old, possess a valid driver's license and meet the minimum standards for driving a Wisconsin state vehicle. Applicants with misdemeanor convictions involving domestic violence or any felony convictions must possess a Governor's pardon which allows possession of firearms and are required to submit a copy of these documents with the Application Supplement. Additionally, a criminal background check will be conducted and conviction records will be reviewed to determine if there is a substantial relationship between the circumstances of the crime and the duties and responsibilities of the job. It is recommended that you complete the *Correctional Officer Eligibility Checklist* first to determine your eligibility status.

The application materials contain a *Preference Sheet* which will afford you the opportunity to identify three correctional facilities where you are interested in employment if selected for hire. A listing of current vacancies is available on the DOC website at www.wi-doc.com. Other vacancies may occur throughout the process.

The Department of Corrections has a fraternization policy regarding relationships between its employees and offenders who are under custody or supervision of the Department. All new employees are asked to read and sign an acknowledgment of receipt of the policy. The policy forbids employees from having relationships with offenders or juveniles under the custody or supervision of the Department. The policy defines which relationships are prohibited. Employees are responsible for consulting with their supervisors on possible conflicts with this policy. There is a procedure for requesting exceptions.

If you have any questions, please feel free to contact me at (608) 240-5509 or by e-mail at jan.wildman@wisconsin.gov.

Sincerely,

Jan Wildman

Jan Wildman, Officer Selection Coordinator
Bureau of Personnel and Human Resources

OFFICER SELECTION SCHEDULE
CLASS START – OCTOBER 2008 THRU JANUARY 2010

<u>APPLICATION DUE DATE</u>	<u>LOCATION</u>	<u>INTERVIEW DATES</u>	<u>SELECTION DATES</u>	<u>MEDICAL/ FITNESS DATES</u>	<u>CLASS START DATE</u>	<u>GRADUATION DATE</u>
August 12, 2008	Oshkosh	August 26-28, 2008	September 16-18, 2008	September 29-October 10, 2008	October 27, 2008	December 12, 2008
October 28, 2008	Oshkosh	November 11-13, 2008	November 18-20, 2008	December 8-19, 2008	January 05, 2009	February 20, 2009
December 16, 2008	Oshkosh	January 6-8, 2009	January 21-23, 2009	February 2-13, 2009	March 02, 2009	April 17, 2009
February 18, 2009 APRIL CLASS HAS BEEN CANCELED						
April 29, 2009	Oshkosh	May 12-14, 2009	May 27-29, 2009	June 8-19, 2009	July 6, 2009 August 3, 2009	August 21, 2009
June 24, 2009 AUGUST CLASS CANCELED						
August 12, 2009	Oshkosh	August 25-27, 2009	September 9-11, 2009	September 21-October 2, 2009	October 19, 2009	December 4, 2009
October 21, 2009	Oshkosh	November 3-5, 2009	November 17-19, 2009	December 7-18, 2009	January 4, 2010	February 19, 2010

Updated 06/08/09

CORRECTIONAL OFFICER ELIGIBILITY CHECKLIST

MINIMUM PREREQUISITES – Please answer the following questions: **YES NO**

- 1. Will you be at least 18 years old as of the class start date (see attached scheduled)?
- 2. Do you have a valid driver’s license?

LICENSE NUMBER: _____
ISSUING STATE: _____

**Out of state applicants should attach a copy of their driving record obtained from the state DMV.*

- 3. Do you have a minimum of 2 years licensed driving experience?
- 4. Do you have a high school diploma or equivalent?

If you answered “NO” to any of the above questions (1 through 4) you are not eligible for the position of correctional officer. Please do not continue to complete this application.

DRIVING RECORD – the following questions pertain to your driving record:

YES NO

- 5. Is your license suspended or revoked?
- 6. Have you received an Operating while Intoxicated (OWI)/Driving under the Influence (DWI) citation within the past 12 months?
- 7. Have you ever been convicted of two or more Operating while Intoxicated (OWI)/Driving under the Influence (DWI)?

If you answered “YES” to any of the above questions (5 through 7) you are not eligible for the position of correctional officer. Please do not continue to complete this application.

ARREST & CONVICTION RECORD – the following questions pertain to your arrest and conviction record:

YES NO

- 8. Are you currently subject to a court ordered injunction or restraining order under which you are not permitted to possess firearms?
- 9. Are you currently on probation or parole or under the supervision of a federal, state or local law enforcement or correctional agency?
- 10. Have you ever been convicted of a felony for which you did not receive a Governor’s pardon allowing the possession of firearms?
- 11. Have you ever been convicted of a misdemeanor involving domestic violence for which you did not receive a Governor’s pardon allowing the possession of firearms?

If you answered “YES” to any of the above questions (8 through 11) you are not eligible for the position of correctional officer. Please do not continue to complete this application.

I state that all the information above is true and complete to the best of my knowledge and I understand that any falsification or omission of information may disqualify me for this position.

Signature _____ **Date** _____

State of Wisconsin - Office of State Employment Relations
APPLICATION FOR STATE EMPLOYMENT

* Required items

Only complete the shaded areas (#4 thru #8; #10 thru #13; #16 and #17)

1. **Civil Service Job Title** as it appears in the announcement: CORRECTIONAL OFFICER

2. ***Job Announcement Code(s)** of the position(s) for which you are applying:

3. **Score Reuse:**

Job Code #1: 04 - 66500 Job Code #2: _____ - _____ Job Code #3: _____ - _____

4. ***Social Security Number:** _____

5. ***Mother's Maiden Name:** _____

6. **How do we contact you?**

*Last Name:		*First Name:		M.I.:
*Mailing Address:				
*City:	*State:	*Zip:	Country:	
Day Phone:		E-Mail Address:		
Evening Phone:		Other Number:		

7. **I am currently legally authorized to work in the United States.** Yes No

8. **I am a Wisconsin resident.** Yes No

9. **Exam City Code:** NA (Complete this if a written exam is required; see instructions for the codes.)

Gender and race information are used for equal employment opportunity/affirmative action purposes only.

10. **Gender:**

Female Male

11. **Race/Ethnicity:**

(Check only one)

- 1 Black (Not Hispanic) 2 Asian or Pacific Islander 3 American Indian/Alaska Native 4 Hispanic 5 White (Not Hispanic)

12. **Birth Date:**

Birth date information is used for administrative purposes only. Use numbers, e.g., 02/09/1971 (MM/DD/YYYY)

___ / ___ / _____

13. **Educational Level:** Check highest level completed.

- 01 Did not complete high school/GED 02 Completed GED/HSED 03 Graduated from high school 04 Some college, no degree 05 One-year vocational diploma 06 Two-year associate degree 07 Bachelor's degree 08 Some graduate degree courses 09 Graduate college degree

14. ***What are your work preferences** for the position for which you are applying? Check all that you will accept.

FT Full-time (40 hours/week)

15. ***Where would you like to work?**

Complete the enclosed Preference Sheet (Page 12 of the application materials)

APPLICATION FOR STATE EMPLOYMENT - Page 2

16. How did you hear about this job? Check all that apply.

<input type="checkbox"/> A Internet: <i>Select below.</i>	<input type="checkbox"/> M Current State Employee
<input type="checkbox"/> B http://WiscJobs.state.wi.us	<input type="checkbox"/> N Radio Ad
<input type="checkbox"/> C www.wisconsin.gov	<input type="checkbox"/> O Television Ad
<input type="checkbox"/> D DWD/JOBNET	<input type="checkbox"/> P Job Fair
<input type="checkbox"/> E other career sites	<input type="checkbox"/> Q State Workshop
<input type="checkbox"/> F state agency web site	<input type="checkbox"/> R Library
<input type="checkbox"/> G Office of State Employment Relations	<input type="checkbox"/> S W-2/SEO Services
<input type="checkbox"/> H Job Service/Job Center	<input type="checkbox"/> T Direct Mail
<input type="checkbox"/> I Another State Agency	<input type="checkbox"/> U Current Opportunities Bulletin
<input type="checkbox"/> J Community Organization	<input type="checkbox"/> V Other
<input type="checkbox"/> K Wisconsin College/University: See list of codes on next page; enter College/University code here: _____	
<input type="checkbox"/> L Newspaper: See list of codes on next page; enter Newspaper code here: _____	

17. Referral Permission: State agencies and universities may search our database for applicants with specific skills or experiences. Do you wish to have your application available to other state agencies, universities, and city and county governments?

Yes No

Certification Statement

I certify that the information I have provided in this application is true to the best of my knowledge and I understand that I may be required to verify the information before being appointed. I understand that any false, misleading, or missing information may disqualify me from employment consideration.

I agree. I disagree. *Signature: _____ Date: ____/____/____

HOW DID YOU FIND OUT ABOUT THIS JOB?

Please identify the source(s) of information that led you to apply for this vacancy.

Wisconsin Colleges/Universities: If applicable, use the codes below to identify the Wisconsin College or University where you learned about this job opportunity. Enter a code from the list below in section 16(K) of the *Application* form.

<u>Code</u>	<u>College/University</u>	<u>Code</u>	<u>College/University</u>	<u>Code</u>	<u>College/University</u>
01 -	Alverno College	22 -	Moraine Park Technical	43 -	UW-Marinette
02 -	Beloit College	23 -	Mount Mary College	44 -	UW-Marshfield/Wood County
03 -	Blackhawk Technical	24 -	Mount Senario College	45 -	UW-Milwaukee
04 -	Cardinal Stritch University	25 -	Nicolet Area Technical	46 -	UW-Oshkosh
05 -	Carroll College	26 -	North Central Technical	47 -	UW-Parkside
06 -	Carthage College	27 -	Northeast Wisconsin Technical	48 -	UW-Platteville
07 -	Chippewa Valley Technical	28 -	Northland College	49 -	UW-Richland
08 -	Concordia University	29 -	Ripon College	50 -	UW-River Falls
09 -	Edgewood College	30 -	Silver Lake College	51 -	UW-Rock County
10 -	Fox Valley Technical	31 -	Southwest Wisconsin Technical	52 -	UW-Sheboygan
11 -	Gateway Technical	32 -	St. Norbert College	53 -	UW-Stevens Point
12 -	Lakeland College	33 -	UW-Baraboo/Sauk County	54 -	UW-Stout
13 -	Lakeshore Technical	34 -	UW-Barron County	55 -	UW-Superior
14 -	Lawrence University	35 -	UW-Eau Claire	56 -	UW-Washington County
15 -	Madison Area Technical	36 -	UW-Fond du Lac	57 -	UW-Waukesha
16 -	Marian College	37 -	UW-Fox Valley	58 -	UW-Whitewater
17 -	Marquette University	38 -	UW-Green Bay	59 -	Viterbo College
18 -	Mid-State Technical	39 -	UW-La Crosse	60 -	Waukesha County Technical
19 -	Milwaukee Area Technical	40 -	UW-Madison	61 -	Western Wisconsin Technical
20 -	Milwaukee Institute of Art & Design	41 -	UW-Manitowoc	62 -	Wisconsin Indianhead Technical
21 -	Milwaukee School of Engineering	42 -	UW-Marathon County	63 -	Wisconsin Lutheran College

Newspapers: If applicable, use the codes below to identify the newspaper where you learned about this opportunity. Enter a code from the list below in section 16(L) of the *Application* form.

<u>Code</u>	<u>Newspaper</u>	<u>Code</u>	<u>Newspaper</u>	<u>Code</u>	<u>Newspaper</u>
01 -	Appleton Post-Crescent	14 -	La Crosse Tribune	27 -	Stevens Point Journal
02 -	Ashland Daily Press	15 -	Madison Capital Times	28 -	Umoja
03 -	Beaver Dam Daily Citizen	16 -	Madison Times	29 -	Watertown Daily Times
04 -	Beloit Daily News	17 -	Madison Wisconsin State Journal	30 -	West Bend Daily News
05 -	Campus Newspaper	18 -	Manitowoc Herald Times Reporter	31 -	Wisconsin Rapids Daily Tribune
06 -	Chippewa Falls Herald	19 -	Marshfield News Herald		
07 -	Eau Claire Leader-Telegram	20 -	Milwaukee Journal Sentinel		<u>Out-of-State Newspapers</u>
08 -	Employment Times	21 -	Milwaukee Times	32 -	Chicago Sun-Times
09 -	Fond du Lac Reporter	22 -	Now Hiring	33 -	Chicago Tribune
10 -	Green Bay News Chronicle	23 -	Oshkosh Northwestern	34 -	Minneapolis Star-Tribune
11 -	Green Bay Press Gazette	24 -	Racine Journal Times	35 -	Rockford Register Star
12 -	Janesville Gazette	25 -	Shawano Leader	36 -	St. Paul Pioneer Press
13 -	Kenosha News	26 -	Sheboygan Press	37 -	Wall Street Journal

17. REFERRAL PERMISSION

Check yes to give us permission to refer your name to other public employers such as state agencies, universities, and city and county governments. Your response will not affect your eligibility for state employment.

APPLICATION SUPPLEMENT CORRECTIONAL OFFICER

CONVICTION RECORD

All applicants interviewed for this position will be asked to provide information about any conviction records or pending charges. *This information will be retained in your application file which is **confidential**.*

You and the employment interviewer will discuss the facts surrounding your record as related to performance in this position.

Note: Applicants with felony convictions must possess either a Governor's pardon with no firearms restrictions or a federal waiver to bear firearms and are required to submit a copy of these documents prior to or at the time of the interview in order to be considered further.

- 1) Do you have any **pending** criminal or municipal ordinance charges for an offense including traffic but not parking or speeding? YES NO
- 2) Have you been **convicted or fined** for any offense including traffic but not parking or speeding? (Include offenses which have been expunged) YES NO
- 3) Are you currently under any type of supervision (e.g. Probation, Parole, Huber)? YES NO

IF THE ANSWER IS YES TO ANY OF THE ABOVE THREE QUESTIONS, INDICATE: (Attach additional pages if necessary)

The nature of the offense

Date of offense

Date of conviction

Name and location of court

Name & telephone number of Probation/Parole Agent

Please discuss the details of the incident and the disposition/outcome (sentence, fine, probation, Huber, suspension).

STATEMENT OF INTEREST

- Yes, I am interested in further consideration for employment as a Corrections Officer at this time. I am prepared to accept assignment either statewide or to a particular geographic area as indicated in the most recent Current Opportunities Bulletin or as announced by the Department of Corrections.
- No, I am not prepared to accept assignment either statewide or to any of the areas currently guaranteed placement. (If you answer "no" you will not be eligible for an interview).

I state that all the information on this application is true and complete to the best of my knowledge and I understand that any falsification or omission of information may disqualify me for this position.

APPLICANT SIGNATURE

DATE SIGNED

INSTRUCTIONS FOR COMPLETING THE
APPLICATION SUPPLEMENT (DOC-1886)

Completion of the required information on the application supplement is self-explanatory. Particular attention should be given to the “work experience summary.” The Department of Corrections may contact your employment references. When completing the work experience summary you must –

- include employment dates
- include the street number, street name, city, state, zip code and phone number
- provide a supervisory reference for each job you have held within the last ten years
- include a list of volunteer or professional references if you do not have at least three employment references during the past five years – this list should include a complete mailing address and phone number
- include two additional references if you have been with the same employer for the past five years
- provide the mailing address and phone number of some of the clients you provide services to if you are self-employed
- include internships and volunteer work in the work experience summary


Military – If you are currently in the Guard or Reserves please include your current unit and supervisor in the work experience. All military veterans must include a copy of your DD Form 214 with your application materials. The copy should include the type of discharge.

Employment Gaps – Please explain any employment gap of three months or more. This can be done on a separate sheet of paper if necessary.

It is critical that we are able to contact your references. We recommend you personally contact each of your references and request that they respond to our request for information. If an employer requires a “release authorization” you should make arrangements to complete one.

<p>IMPORTANT: Your application materials will not be processed if you have not provided at least three references with complete mailing addresses and phone numbers.</p>
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EMPLOYMENT DATES (Mo/Yr) - TYPE From <input type="checkbox"/> Full-time To <input type="checkbox"/> Part-time		EMPLOYER NAME
R E F E R E N C E	FULL NAME OF SUPERVISOR	LOCATION (City & State)
	STREET ADDRESS	E-MAIL ADDRESS
	CITY, STATE, ZIP CODE	YOUR TITLE
	DAYTIME TELEPHONE NUMBER ()	REASON FOR LEAVING
EMPLOYMENT DATES (Mo/Yr) - TYPE From <input type="checkbox"/> Full-time To <input type="checkbox"/> Part-time		EMPLOYER NAME
R E F E R E N C E	FULL NAME OF SUPERVISOR	LOCATION (City & State)
	STREET ADDRESS	E-MAIL ADDRESS
	CITY, STATE, ZIP CODE	YOUR TITLE
	DAYTIME TELEPHONE NUMBER ()	REASON FOR LEAVING
From <input type="checkbox"/> Full-time To <input type="checkbox"/> Part-time		EMPLOYER NAME
R E F E R E N C E	FULL NAME OF SUPERVISOR	LOCATION (City & State)
	STREET ADDRESS	E-MAIL ADDRESS
	CITY, STATE, ZIP CODE	YOUR TITLE
	DAYTIME TELEPHONE NUMBER ()	REASON FOR LEAVING

IF ONE OF THE REFERENCES YOU'VE PROVIDED WOULD KNOW YOU BY ANOTHER NAME, PLEASE INDICATE THAT NAME 

MAY WE CONDUCT A PERSONAL BACKGROUND CHECK INCLUDING CONTACT OF YOUR REFERENCES NAMED ABOVE AND REVIEW OTHER RECORDS AS MAY BE REQUIRED FOR SOME POSITIONS? Yes No – Please Explain

I certify that the information in this application is true to the best of my knowledge and I understand that I may be required to verify the information before being appointed. I understand that any false, misleading, or missing information may disqualify me from employment consideration.	
APPLICANT SIGNATURE	DATE SIGNED

PREFERENCE SHEET

NAME _____

This preference sheet will enable you to enter your top three (3) choices of where you would like to be placed upon graduating from the correctional officer preservice training program. Please enter in numerical order (1, 2, 3) your three choices with #1 being your first choice of assignment, followed by your second and third choice. A map of all facilities where entry-level correctional officers are placed is on the following page. **We recommend you review the list of current and anticipated vacancies on the DOC website at www.wi-doc.com prior to completing this section.**

<i>Preference #</i>	<i>Facility</i>	<i>City</i>	<i>County</i>
	Chippewa Valley Correctional Treatment Facility (CVCTF)	Chippewa Falls	Chippewa
	Columbia Correctional Institution (CCI)	Portage	Columbia
	Dodge Correctional Institution (DCI)	Waupun	Dodge
	Fox Lake Correctional Institution (FLCI)	Fox Lake	Dodge
	Green Bay Correctional Institution (GBCI)	Green Bay	Brown
	Jackson Correctional Institution (JCI)	Black River Falls	Jackson
	Kettle Moraine Correctional Institution (KMCI)	Plymouth	Sheboygan
	Mendota Mental Health Institute (MMHI)	Madison	Dane
	Milwaukee Secure Detention Facility (MSDF)	Milwaukee	Milwaukee
	New Lisbon Correctional Institution (NLCI)	New Lisbon	Juneau
	Oakhill Correctional Institution (OCI)	Oregon	Dane
	Oshkosh Correctional Institution (OSCI)	Oshkosh	Winnebago
	Prairie du Chien Correctional Institution (PDCI)	Prairie du Chien	Crawford
	Racine Correctional Institution (RCI)	Sturtevant	Racine
	Racine Youthful Offender Correctional Facility (RYOCF)	Racine	Racine
	Redgranite Correctional Institution (RGCI)	Redgranite	Waushara
	Robert E Ellsworth Correctional Center (REECC)	Union Grove	Racine
	Stanley Correctional Institution (SCI)	Stanley	Chippewa
	Taycheedah Correctional Institution (TCI)	Fond du Lac	Fond du Lac
	Waupun Correctional Institution (WCI)	Waupun	Dodge
	Wisconsin Resource Center (WRC)	Winnebago	Winnebago
	Wisconsin Secure Program Facility (WSPF)	Boscobel	Grant

Wisconsin Department of Corrections Statewide Correctional Facilities Where Correctional Officers Are Assigned



CONFIDENTIAL INFORMATION
RELEASE AUTHORIZATION

Name and Address of Agency or Organization Being Authorized
to Release Information

LEAVE BLANK

INDIVIDUAL WHO IS SUBJECT OF RECORD	
NAME	
ADDRESS	
CITY, STATE, ZIP CODE	
IDENTIFYING NUMBER	DATE OF BIRTH
SS#	
INFORMATION MAY BE RELEASED TO	
NAME	
Department of Corrections	
ORGANIZATION	TELEPHONE NUMBER
BPHR	608-240-5509
ADDRESS	
3099 E. Washington Avenue	
CITY, STATE, ZIP CODE	
Madison, WI 53704	

SPECIFIC RECORDS AUTHORIZED FOR RELEASE (Include dates of records, if applicable)

1. Present employer(s)
2. Former employer(s)
3. Any School, College, University, or other Educational Institution
4. Any Court, Police Agency or other location where criminal and misdemeanor records are kept
5. Selective Service System

I hereby authorize my fingerprints and social security number to be used in criminal record checks.

PURPOSE OR NEED FOR RELEASE OF INFORMATION (Be Specific)

As evidence of my desire to obtain a position as a Correctional Officer, I hereby authorize any official representative of the Wisconsin Department of Corrections, bearing this release to obtain information and records pertaining to me and my personal background whether such information and records are public, private, or confidential in nature from any or all of the above sources. I understand that the above information is necessary for determining my eligibility and suitability to obtain a Correctional Officer position with the Department of Corrections. I hereby release any individual or institution, including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, because of compliance with this authorization and request to release information or any attempt to comply with it. A photo copy of this release form will be valid as an original thereof.

I understand that I may revoke this authorization, in writing, at any time except where information has already been released as a result of this authorization. Unless revoked, this authorization will remain in effect until 6 months from the date I sign this authorization.

As evidenced by my signature below, I hereby authorize disclosure of records to the person(s) or agency(s) as specified above.

SIGNATURE OF INDIVIDUAL WHO IS SUBJECT OF RECORD

DATE SIGNED

RETURNING THE APPLICATION

Only those pages that require you to enter information should be returned. Please consolidate the materials and return them in the following order:

- 1 – Application for State Employment (OSER-DMRS-38)
- 2 – Correctional Officer Eligibility Checklist
- 3 – Application Supplement – Correctional Officer – Conviction Record (DOC 1244)
- 4 – Correctional Officer – Application Supplement (DOC-1886)
- 5 – Preference Sheet
- 6 – Confidential Information Release Authorization (DOC-1163D)

Any other materials you are attaching to your application (i.e. DD form 214 for military veterans) should be included after these documents.

Applications for Correctional Officer should be returned to the following address:

**Department of Corrections
BPHR (Officer Selections)
3099 East Washington Avenue
PO Box 7925
Madison, WI 53707-7925**

Incomplete applications will not be processed. Please use the following checklist to determine if you have completed the application correctly:

- Your signature should have been entered a minimum of **five** times on the application materials.
- You have provided complete mailing addresses (including zip codes) and phone numbers for your current and previous employers.
- You have provided employment information for the past **ten years** if applicable. Please attach an additional sheet using the same format if there is not enough space on the application.
- You must have at least three references the Department may contact.
- You have included your DD form 214 with type of discharge if you are a military veteran.