

ARMY

TRANSCRIPT REQUEST FOR AARTS

**Please send an official copy to:**

Western Nevada College  
Admissions and Records Office  
2201 West College Parkway  
Carson City, NV 89703

Name:

\_\_\_\_\_

Date of Birth:

\_\_\_\_\_

Social Security Number:

\_\_\_\_\_

Date Enlisted- From:

Date Enlisted- To:

\_\_\_\_\_

Station where seperated:

\_\_\_\_\_

Veterans Signature:

\_\_\_\_\_

U.S. Army

Manager AARTS

415 McPherson Avenue

Ft. Leavenworth, KS 66027-1373

886-297-4427