

Online service records requests

Using this tool you can make a new request for a Veteran's records or check the status of existing request.

Privacy Act of 1974 Compliance Information +

Paperwork Reduction Act Public Burden Statement +

Do you want to check the status of previous request, or make a new request?

[Check status of existing request](#)

[Make a new request](#)

Online service records requests

Using this tool you can make a new request for a Veteran's records or check the status of existing request.

Privacy Act of 1974 Compliance Information

The following information is provided in accordance with 5 U.S.C. 552a(e)(3) and applies to this collection of information. Authority for collection of the information is 44 U.S.C. 2907, 3101, and 3103, and E.O. 9397 of November 22, 1943. Disclosure of the information is voluntary. If the requested information is not provided, it may delay servicing your inquiry because NPRC may not have all of the information needed to locate the veteran's record. The purpose of the information collected is to assist NPRC in locating the correct military service record(s) or information to answer your inquiry. The information collected will serve as a record of disclosure. The information collected may also be disclosed to the Department of Defense components, The Department of Veterans Affairs, the Department of Homeland Security (Coast Guard), or the National Archives and Records Administration when the original custodian of the military health and personnel records transfers all or parts of those records to that agency. If the service member was a member of the National Guard, the form may also be disclosed to the Adjutant General of the appropriate state, District of Columbia, or Puerto Rico, where he or she served.

Paperwork Reduction Act Public Burden Statement

Online service records requests

Using this tool you can make a new request for a Veteran's records or check the status of existing request.

Privacy Act of 1974 Compliance Information



Paperwork Reduction Act Public Burden Statement



A Federal agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a current valid OMB control number. The OMB Control No. for this information collection is 3095-0029 and the current expiration date is 04/30/2024. Public burden for this collection of information is estimated to be five minutes, including time for reviewing instructions and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to National Archives and Records Administration (MP), 8601 Adelphi Road, College Park, MD 20740-6001.

Do you want to check the status of previous request, or make a new request?

[Check status of existing request](#)

[Make a new request](#)

eVetRecs
Request Veteran Records

- 1 **Basic information**
- 2 Service and request details
- 3 Report of Separation
- 4 Review and submit
- 5 Confirmation

Basic Information

[Please be sure to review the instructions before filling in the form.](#)

A fee may be required to process your request. ▾

Does your request pertain to the Camp Lejeune Justice Act of 2022 or the PACT Act? **(*required)**

- Yes
- No

Are you the veteran or next-of-kin? If not, choose 'Other.'
(*required)

- Veteran
- Next of Kin of Veteran
- Other

Are you seeking information about current or former military service? **(*required)**

- Former Military Service
- Current Military Service

[Continue](#)

eVetRecs
Request Veteran Records

- 1 **Basic information** [Edit](#)
- 2 **Service and request details**
- 3 **Report of Separation**
- 4 **Review and submit**
- 5 **Confirmation**

Veteran Service Details

What was your branch of service? (*required)
Note: separate requests are required for each branch the veteran served in

What was your service component?

Were you an Officer or Enlisted?

Which of these categories best describes why you're requesting the records? (*required)
If your request applies to multiple categories, please clarify in the Comments box in step 3

[Continue](#)

eVetRecs
Request Veteran Records

- 1 **Basic information** [Edit](#)
- 2 **Service and request details** [Edit](#)
- 3 **Report of Separation**
 - Veteran information
 - Documents requested
 - Requester information
- 4 **Review and submit**
- 5 **Confirmation**

Veteran Information

i Please provide the full name as it was used during this period of service; otherwise, we may not be able to locate the veteran's record.

If the veteran served under multiple names, please indicate in the Comments section later in the submission process.

Veteran's first name (*required)

Veteran's middle name

Veteran's last name (*required)

Veteran's Suffix

Veteran's Social Security number

We may be unable to identify a record without this information.

- 1 **Basic information** [Edit](#)
- 2 **Service and request details** [Edit](#)
- 3 **Report of Separation**
 - Veteran information
 - Documents requested
 - Requester information
- 4 **Review and submit**
- 5 **Confirmation**

Veteran's Social Security number

We may be unable to identify a record without this information.

Veteran's date of birth

We may be unable to identify a record without this information.

Include just the year if full date is unknown, otherwise - leave blank.

Month	Day	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Veteran's place of birth

Please provide city and state/province

Service (or serial) number

Service numbers are 4 to 9 digits and only for service before 1971.

Date the veteran entered the service

We may be unable to identify a record without this information.

Include just the year if full date is unknown, otherwise - leave blank.

Month	Year
<input type="text"/>	<input type="text"/>

Date the veteran left the service

- 1 Basic information** [Edit](#)
- 2 Service and request details** [Edit](#)
- 3 Report of Separation**
 - Veteran information
 - Documents requested
 - Requester information
- 4 Review and submit**
- 5 Confirmation**

Veteran's place of birth

Please provide city and state/province

Service (or serial) number

Service numbers are 4 to 9 digits and only for service before 1971.

Date the veteran entered the service

We may be unable to identify a record without this information. Include just the year if full date is unknown, otherwise - leave blank.

Month Year

Date the veteran left the service

We may be unable to identify a record without this information. Include just the year if full date is unknown, otherwise - leave blank.

Month Year

[Continue](#)

[Exit and return to Archives.gov](#)



eVetRecs
Request Veteran Records

- 1 **Basic information** [Edit](#)
- 2 **Service and request details** [Edit](#)
- 3 **Report of Separation** [Edit](#)
 - Veteran information
 - Documents requested
 - Requester information
- 4 **Review and submit**
- 5 **Confirmation**

Documents Requested

You are requesting a Report of Separation (DD Form 214 or equivalent). This contains information normally needed to verify military service.

What type of report of separation are you requesting? **(*required)**

Undeleted

This normally will be a copy of the full separation document including such sensitive items as the character of separation, authority for separation, reason for separation, reenlistment eligibility code, separation (SPD/SPN) code, and dates of time lost. An undeleted version is ordinarily required to determine eligibility for benefits.

Deleted

Comments

If information or documents other than a Report of Separation are needed, please indicate below. Creating separate requests may cause processing delays.

[Continue](#)

[Exit and return to Archives.gov](#)

eVetRecs
Request Veteran Records

- 1 **Basic information** [Edit](#)
- 2 **Service and request details** [Edit](#)
- 3 **Report of Separation**
 - [Veteran information](#) [Edit](#)
 - [Documents requested](#) [Edit](#)
 - [Requester information](#)
- 4 **Review and submit**
- 5 **Confirmation**

Requester information

Requester first name (*required)

Requester last name (*required)

Company name

Mailing address

Country (*required)

Street address (*required)
Include Apt/Suite #

City (*required)

State (*required)

ZIP code (*required)
Please provide a response

eVetRecs Request Veteran Records

- 1 Basic information [Edit](#)
- 2 Service and request details [Edit](#)
- 3 Report of Separation
Veteran information [Edit](#)
Documents requested [Edit](#)
Requester information
- 4 Review and submit
- 5 Confirmation

State (required)

ZIP code (*required)
Please provide a response

Daytime phone

Fax number

Email address (*required)
Please provide a valid email address

i Please provide a valid email address. The email address will allow us to communicate with you regarding your request faster. It will also allow us to digitally deliver our response whenever possible. Be sure to monitor your spam and junk folders for emails from @nara.gov.

[Continue](#)

[Exit and return to Archives.gov](#)

- 1 **Basic information** [Edit](#)
- 2 **Service and request details** [Edit](#)
- 3 **Report of Separation**
 - [Veteran information](#) [Edit](#)
 - [Documents requested](#) [Edit](#)
 - [Requester information](#)
- 4 **Review and submit**
- 5 **Confirmation**

Address confirmation

The U.S. Postal Service (USPS) returned different information on your address.

Please select the correct address

USPS record

- 1 ARCHIVES DR
SAINT LOUIS, MO 63138

Your entry

- 1 archives dr
st louis, MO 63138

[Continue](#)

eVetRecs Request Veteran Records

- 1 Basic information [Edit](#)
- 2 Service and request details [Edit](#)
- 3 Report of Separation [Edit](#)
 - Veteran information [Edit](#)
 - Documents requested [Edit](#)
 - Requester information [Edit](#)
- 4 Review and submit
- 5 Confirmation

Review and submit

Please review the information you have entered. If you wish to change something, use the Edit links on the left to go back to a particular step. Retain this information, you may need it to download your response document(s).

Request Information

Requested by	Veteran
Relationship to Veteran	Self
Military service status	Former Military Service
Request regarding	Benefits
Request category	Not Applicable
Requester name	Test McTester
Company	
Requester address	1 ARCHIVES DR SAINT LOUIS, MO 63138
Requester phone	3148010515
Requester fax	
Requester email	kyle.modde@nara.gov
Comments	Test, please send all records, sepdocs, and medals.

Veteran Information

Veteran name	Test McTester
Branch of service	Army
Service component	Active
Officer or enlisted	Enlisted
Date of birth	02/02/1942
Place of birth	St Louis
Date entered service	02/1962
Discharge date	02/1964
Social Security number	856971248
Service number	052452758
Deceased date	
Burial date	


- 1 Basic information [Edit](#)
- 2 Service and request details [Edit](#)
- 3 Report of Separation
Veteran information [Edit](#)
Documents requested [Edit](#)
Requester information [Edit](#)
- 4 Review and submit
- 5 Confirmation

Requester email	kyle.modde@nara.gov	Burial date
Comments	Test, please send all records, sepdocs, and medals.	
Authorization documentation	Not Applicable	

Electronic signature

My statements on this form, and any attachments to it, are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that a knowing and willful false statement on this form can be punished by fine or imprisonment or both. (See section 1001 of title 18, United States Code). By typing my name in the box below I am also explicitly declaring that my identity and relationship with this veteran have been truthfully presented. Fraudulent authorizations will be referred to NARA's Office of Inspector General for investigation and criminal prosecution.

Type your name (Format: Firstname Lastname) to sign this request and agree to the above terms (***required**)


I'm not a robot 
reCAPTCHA
Privacy · Terms

[Submit Request](#)

[Exit and return to Archives.gov](#)

Check request status

Service request number **(*required)**
Your service request number was included on the confirmation page after submitting your request.
It is a number that looks like 1-123456789.

I'm not a robot 
reCAPTCHA
Privacy - Terms

Check Status

Check request status

Status

Request number: 2-29232355475

Awaiting processing

Thank you for contacting the National Personnel Records Center. We've received your request, and it is assigned to a staff member for processing.

Received	Processed	Sent
Once requests are received, we verify that we have all the necessary information before processing begins.		Once a request has been processed, please allow up to 5 days for delivery.

[Check Another Request](#)