How to Complete DD Form 1172-2,

Application for DOD Common Access Card DEERS Enrollment

(For Korean Employees)

Item	Title	Explanation	Example
1	Name	Self Explanatory	Son, Yon Chae
2	Sex	M-Male F-Female	M or F
3	SSN or DOD	FIN or DOD Number on the back of CAC	1467895042
5	Organization	Employee's Organization	51 CES/CEXX
6	Pay Grade	KGS or KWB Grade	KGS-05 or KWB-05
9	Date of Birth	Self Explanatory	1985Aug17
10	Place of Birth	Self Explanatory	Pyongtaek-Si, Kyongki-Do
11	Current Residence Address	Self Explanatory	Shown in Sample
16	Primary E-Mail Address	Self Explanatory	yonchae.son.kr@us.af.mil * Do not marking at
	7 Iddi OSS		(Permission to use for benefits notifications)
17	Telephone Number	Self Explanatory(Include Area Code/DSN)	315-784-XXXX
18	City of Duty Location	Duty Location	Pyongtaek-Si
22	Signature and Date	Employee's Signature and Date	Shown in Sample
32	ELIG ST/ EFF DATE	Employee's Service Computation Date(SCD) or Date Started Work In the Air Force	Shown in Sample
33	Card Expiration Date	3 Years after current CAC expiration date	Show in Sample

How to Submit DD form 1172-2:

- 1. Employee completes the form
- 2. Submit to Civilian Personnel Office Customer Service Desk, Bldg 936 (Korean Staffing Section, 784-6862)
- 3. CPO completes Section III and issue an employment verification letter and return to the employee.
- 4. Employee submits the signed form and employment verification to 51FSS/Military Personnel Section, Customer Service, Bldg 936, Telephone 784-1845/8106.

 Two types of picture identification are required to show to the customer service representative, such as base pass and old CAC.
- 5. DD form 1172-2, Feb 2011 edition will be used.

OMB No. 0704-0415 APPLICATION FOR IDENTIFICATION CARD/DEERS ENROLLMENT OMB approval expires Jan 31, 2017 Please read Agency Disclosure Notice, Privacy Act Statement, and Instructions prior to completing this form SECTION I - SPONSOR/EMPLOYEE INFORMATION 1. NAME (Last, First, Middle) 3. SSN OR DOD ID NO. 5. ORGANIZATION Son, Yon Chae 1467895042 51 CES/CEXX FN 6. PAY GRADE 7. GEN. CAT 8. CITIZENSHIP 9. DATE OF BIRTH (YYYYMMMDD) 10. PLACE OF BIRTH **KGS-05** 1985Aug17 Korean , Korea 11. CURRENT HOME ADDRESS 12. CITY 13. STATE 14. ZIP CODE 15. COUNTRY #127, Shinchang-dong, Pyongtaek-si, Kyongko-do. ROK Pyongtaek Permission to use for benefits notifications 19. STATE OF DUT LOCATION COUNTRY OF DUTY 16. PRIMARY E-MAIL ADDRESS 17. TELEPHONE NUMBER | 18. CITY OF DUTY LOCATION yonchae.son.kr@us.af.mi Pyongtaek-Si ROK SECTION II - SPONSOR/EMPLOYEE DECLARATION AND REMARKS 21. REMARKS (Cite legal documentation, as applicable.) NOTARY SIGNATURE A letter of Employment AND SEAL Base Pass Common Access Card (CAC) "SAMPLE" "SAMPLE" "SAMPLE" I certify the information provided in connection with the eligibility requirements of this form is true and accurate to the best of my knowledge. (If not signed in the presence of the authorizing/venfying official, the signature must be notarized.) 22. SPONSOR/EMPLOYEE SIGNATURE 23. DATE SIGNED (YYYYMMMDD) SECTION III - AUTHORIZED BY 24. SPONSORING OFFICE NAME 25. CONTRACT NUMBER Osan Civilian Personnel Office 28. OFFICE EMAIL ADDRESS 26. SPONSORING OFFICE ADDRESS (Street, City, State, ZIP Code) 27. SPONSORING OFFICE TELEPHONE NUMBER (Include Area Code/DSN) 29. OVERSEAS ASSIGNMENT (Country) 51 FSS/FSMCXKN 315-784-6268 30. OVERSEAS ASSIGNMENT BEGIN DATE (YYYYMMMDD) 31. OVERSEAS ASSIGNMENT END DATE (YYYYMMMDD) 32. ELIGIBILITY EFFECTIVE DATE (YYYYMMMDD) 33. ELIGIBILITY EXPIRATION DATE (YYYYMMMDD) 2003Nov02 2018Jan10 I certify the individual identified above, based on personal knowledge and available documentation, is in a status eligible for and requires an identification card in the performance of their duties with the DoD or Uniformed Services. 34. SPONSORING OFFICIAL NAME (Last, First, Middle) 35. UNIT/ORGANIZATION NAME Yi, Yong Cha 51 FSS/FSMCXKN 39. DATE VERIFIED (YYYYMMMDD) 36. TITLE 37. PAY GRADE 38. SIGNATURE Chief, Korean staffing Section KGS-11 SECTION IV - VERIFIED BY 40. VERIFYING OFFICIAL NAME (Last, First, Middle Initial) | 41. SITE IDENTIFICATION | 42. TELEPHONE NUMBER 43. SIGNATURE SECTION V - DEPENDENT INFORMATION (Attach additional pages if necessary) 44. NAME (Last, First, Middle) 45. GENDER 46. DATE OF BIRTH (YYYYMMMDD) 47. RELATIONSHIP 48. SSN OR DOD ID NO 50. PRIMARY E-MAIL ADDRESS 49. CURRENT HOME ADDRESS Permission to use for benefits notifications (18 and above) 51. TELEPHONE NUMBER 53. STATE 54. ZIP CODE 52. CITY 55. COUNTRY 56. ELIGIBILITY EFFECTIVE DATE (YYYYMMMDD) 57. ELIGIBILITY EXPIRATION DATE (YYYYMMMDD) B 58. NAME (Last, First, Middle) 59. GENDER 60. DATE OF BIRTH (YYYYMMMDD) 61. RELATIONSHIP 62. SSN OR DOD ID NO. 63. CURRENT HOME ADDRESS 64. PRIMARY E-MAIL ADDRESS 65. TELEPHONE NUMBER (Include Area Code/DSN) Permission to use for benefits notifications (18 and above) 70. ELIGIBILITY EFFECTIVE DATE (YYYYMMMDD) ELIGIBILITY EXPIRATION DATE (YYYYMMMDD) 66. CITY 67. STATE 68. ZIP CODE 69. COUNTRY SECTION VI - RECEIPT Receipt of new card is acknowledged. 72. SIGNATURE 73. DATE ISSUED (YYYYMMMDD)

CAC 발급장소: Military Personnel Section - Customer Service Counter:

건물번호 936,1 층 전면입구

- 1. 근무시간 월-금, 오전 7시-오후 4시, 점심시간에도 계속근무함.
- 2. 컴퓨터에 영문으로 등록 (Sign-In) 한후 대기하면 순번을 부를것임.
- 3. 대기실 전면의 전광판에 세개의 카운터에서 진행되는 업무처리상황을 알려줌
- 4. 한사람의 일처리 시간은 10분에서 15분정도 소요됨 (시스템이 정상가동시)
- 5. 카드를 발급받고 난후 약 한시간-두시간후 (안내를 해줌)직장에 돌아와서 컴퓨터를 새로 부팅하고 카드를 사용하면됨 -카드가 안될경우 안내서를 이용하여 새로 시스템에 입력하던지, Unit System Administrator 에게 도움을 요청.
- 6. 기타사항은 발급하는 군인들의 지시에 따르면 됨. 다음은 간단한 지시사항이니 참고하시기 바랍니다.
 - Will take your picture, so put your chair back to the corner and look at the camera.
 사진을 찍으려하니 의자를 코너로 옮겨 카메라를 보세요.
 - Put your right index finger down. 오른쪽 집게손가락을 이위 (지문감지기) 에 놓으세요.
 - Lift it, and put it back again.
 잠시 떼었다가 다시 올려놓으세요.
 - Put it up higher.
 손가락을 (지문감지기) 더 위쪽으로 가까이 대세요.
 - Push it harder.
 손가락을 약간더 세게 누르세요.
 - Put your left index finger down. 왼쪽집게손가락을 이위에 놓으세요.
- 7. 한직장에 많은 직원이 카드를 내야하는경우, 가능한 한꺼번에 너무많은 인원이 가는것보다 시간과 날자를 분산해서 가는것이 좋음.