

# CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) <b>MILES DOROTHY MARIE 0702552</b>	2. DEPARTMENT, COMPONENT AND BRANCH <b>AIR FORCE - REG AF</b>	3. SOCIAL SECURITY NO. <b>315   54   1908</b>
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4.a. GRADE, RATE OR RANK <b>MAJ</b>	4.b. PAY GRADE <b>04</b>	5. DATE OF BIRTH (YYMMDD) <b>500510</b>	6. RESERVE OBLIG. TERM. DATE Year N/A   Month   Day
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7.a. PLACE OF ENTRY INTO ACTIVE DUTY <b>Chicago IL</b>	7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) <b>Gary IN</b>
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8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>USAFE DP (USAFE)</b>	8.b. STATION WHERE SEPARATED <b>Patrick AFB FL</b>
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9. COMMAND TO WHICH TRANSFERRED <b>Not Applicable</b>	10. SGLI COVERAGE <input type="checkbox"/> None Amount: \$ <b>200,000</b>
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11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.) <b>036P4 - Personnel Officer: 5 Years, 8 months, A0940 - Commander: 2 Years, 7 months, 7371 - Staff Officer: 2 Years, 11 months, 7364: Chief, Social Actions: 4 Years, 8 Months, 8124: Wing/ Base Security: 2 Years.//</b>	<b>12. RECORD OF SERVICE</b>	Year(s)	Month(s)	Day(s)
	a. Date Entered AD This Period	<b>1979</b>	<b>Feb</b>	<b>01</b>
	b. Separation Date This Period	<b>1997</b>	<b>Feb</b>	<b>28</b>
	c. Net Active Service This Period	<b>18</b>	<b>01</b>	<b>00</b>
	d. Total Prior Active Service	<b>04</b>	<b>03</b>	<b>20</b>
	e. Total Prior Inactive Service	<b>00</b>	<b>02</b>	<b>12</b>
	f. Foreign Service	<b>05</b>	<b>03</b>	<b>10</b>
	g. Sea Service	<b>00</b>	<b>00</b>	<b>00</b>
h. Effective Date of Pay Grade	<b>1990</b>	<b>Apr</b>	<b>01</b>	

13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service)  
**Joint Service Achievement Medal, AF Commendation Medal with 3 devices, Meritorious Service Medal with 2 devices, Defense Meritorious Service Medal, AF Training Ribbon, AF Overseas Short Tour Ribbon (SEE REMARKS)**

14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed)  
**Professional Manpower and Personnel Course, 2 weeks, Aug 93; Academic Instructor School, 3 weeks, Dec 85; Assistant for Social Actions Course, 2 weeks, Oct 81; Security Specialist Course, 3 weeks, Aug 79.**


15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM	Yes	No	15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT	Yes	No	16. DAYS ACCRUED LEAVE PAID <b>60.0</b>
		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		

17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION  Yes  No

18. REMARKS  
**ITEM 13: AF Overseas Long Tour Ribbon, National Defense Service Medal, AF Longevity Service Award with 4 devices, AF Good Conduct Medal, Small Arms Expert Marksmanship Ribbon/Pistol, AF Organisational Excellence Award with 1 device.  
 ITEM 14: Chief, Social Actions Course, 3 weeks, Feb 81; Defense Equal Opportunity Management Institute, 4 weeks, Feb 90; Alternative Dispute (Meditation Course, 1 week, July 94; USAF Facilitator Skills Training, 16 Hours, Nov 98; The Seven Habits of Highly Effective People, 40 Hours, Jan 97; Squadron Officer School, 12 weeks, Jun 84.  
 SEE CONTINUATION SHEET  
 Data herein are subject to computer matching within DoD or with other agencies for verification purposes and determining eligibility or compliance for Federal benefits.**

19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) <b>834 Vermont Street Gary IN 46407</b>	19.b. NEAREST RELATIVE (Name and address - include Zip Code) <b>Lattie Miles 834 Vermont Street Gary IN 46407</b>
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20. MEMBER REQUESTS COPY 6 BE SENT TO, IN DIR. OF VET AFFAIRS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) <b>ROBERT R. SNIDER, Capt, USAF Act NCOIC, Separations/Retirements</b>
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21. SIGNATURE OF MEMBER BEING SEPARATED  


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1. NAME (LAST, FIRST, MI) 2. DEPARTMENT, COMPONENT AND BRANCH 3. SOCIAL SECURITY  
MILES DOROTHY MARIE AIR FORCE -- REG AF 315 54 1908

4a. GRADE, RATE, OR RANK 4b. PAY GRADE 4c. DATE OF SEPARATION  
MAJ O4 1997 Feb 28

Subject to Recall to Active Duty by the Secretary of the Air Force.  
Served 2 Aug 90 to 28 Feb 97 in Support of Operation Desert SHIELD/STORM.  
Copy 5 - Louisiana Claims Control Center, UCX/UCFE, PO BOX 94246, Capital  
Stations, Baton Rouge LA 70804-9246.  
Copy 3 - Department of Veterans Affairs, Data Processing Center (214),  
1615 E. Woodward St., Austin TX 78772.  
---NOTHING FOLLOWS---



*Dorothy M. Miles*  
MILES DOROTHY MARIE

*Robert R. Snyder*  
ROBERT R. SNYDER, SSgt, USAF  
Asst NCOIC, Separations/Retirements

# CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle)<sup>2</sup> **MILES DOROTHY MARIE** 2. DEPARTMENT, COMPONENT AND BRANCH **AIR FORCE REG AF, 56** 3. SOCIAL SECURITY NO. **815 | 54 | 1908**

4.a. GRADE, RATE OR RANK **MAJ** 4.b. PAY GRADE **O4** 5. DATE OF BIRTH (YYMMDD) **500510** 6. RESERVE OBLIG. TERM. DATE  
Year N/A | Month | Day

7.a. PLACE OF ENTRY INTO ACTIVE DUTY **Chicago IL** 7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) **Gary IN**

8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND **USAFE DP (USAFE)** 8.b. STATION WHERE SEPARATED **Patrick AFB FL**

9. COMMAND TO WHICH TRANSFERRED **Not Applicable** 10. SGLI COVERAGE  None  
Amount: \$ **200,000**

11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.)	12. RECORD OF SERVICE		
	Year(s)	Month(s)	Day(s)
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	b. Separation Date This Period	1997	Feb 28
	c. Net Active Service This Period	18	01 00
	d. Total Prior Active Service	04	03 20
	e. Total Prior Inactive Service	00	02 12
	f. Foreign Service	05	03 10
	g. Sea Service	00	00 00
	h. Effective Date of Pay Grade	1990	Apr 01

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15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM  Yes  No 15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT  Yes  No 16. DAYS ACCRUED LEAVE PAID **60.0**

17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION  Yes  No

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20. MEMBER REQUESTS COPY 6 BE SENT TO IN DIR. OF VET AFFAIRS  Yes  No 21. SIGNATURE OF MEMBER BEING SEPARATED *Dorothy Miles* 22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) **ROBERT S. SMITH, 85SGT, USAF**  
**Asst. NCOIC, Separations/Retirements**

**SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)**

23. TYPE OF SEPARATION **RETIREMENT** 24. CHARACTER OF SERVICE (Include upgrades) **HONORABLE**

25. SEPARATION AUTHORITY **AFI 36-3203** 26. SEPARATION CODE **8B0** 27. REENTRY CODE **NOT APPLICABLE**

28. NARRATIVE REASON FOR SEPARATION **MAXIMUM SERVICE OR TIME IN GRADE**

29. DATES OF TIME LOST DURING THIS PERIOD **NONE** 30. MEMBER REQUESTS COPY 4  Initials *DM*

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MILES DOROTHY MARIE AIR FORCE -- REG AF 315 54 1908

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