From: Commanding General, Marine Corps Recruiting Command

Subj: REVISED DD FORM 4, ENLISTMENT/REENLISTMENT DOCUMENT—ARMED FORCES OF THE UNITED STATES

Ref: (a) MCRCO 1100.2A

Encl: (1) DD Form 4 (May 2020) (EF)
(2) Summary of Changes

1. Purpose. To notify all levels of Marine Corps Recruiting Command (MCRC) of the revised DD Form 4, Enlistment/Reenlistment Document.

2. Background. The DD Form 4, enclosure (1) is used to record enlistment or reenlistment into the U.S. Armed Forces.

3. Information. The DD Form 4 was updated May 2020. The summary of changes are listed in enclosure (2)

4. Action. Effective 15 November 2020, enclosure (1) will replace all previous versions of the DD Form 4. The updated form will be incorporated into a future Marine Corp Recruiting Support System (MCRISS) upgrade. Enclosure (1) is located at: https://www.esd.whs.mil/Portals/54/Documents/DD/forms/dd/dd0004.pdf

   a. Regions. Ensure this Frost call and the enclosures are promulgated to the lowest possible level.

   b. Marine Corps Districts. Screen officer applications to ensure enclosure (1) is utilized in accordance with this FROST call.

   C. Recruiting Stations. Utilize enclosure (1) when contracting future officer applicants.

5. Point of contact is Mr. Mark Jovich, Deputy, Officer Programs, MCRC G-3 at (703) 784-9649.

W. C. COOK
By direction
ENLISTMENT/REENLISTMENT DOCUMENT - ARMED FORCES OF THE UNITED STATES
(Read Privacy Act Statement and instructions on back before completing this form.)

A. ENLISTEE/REENLISTEE IDENTIFICATION DATA

1. NAME (Last, First, Middle)

2a. SOCIAL SECURITY NUMBER
(Use for new contracts)

2b. DoD ID NUMBER
(Use for reenlistments)

3. HOME OF RECORD
(Street, City, County, State, Country, ZIP Code)

4. PLACE OF ENLISTMENT/REENLISTMENT
(Mil. Installation, City, State, Zip Code)

5. DATE OF: Select one

6. DATE OF BIRTH (YYYYMMDD)

7. PREV MIL SVC UPON ENLIST/REENLIST YEARS MONTHS DAYS

a. TOTAL ACTIVE MILITARY SERVICE

b. TOTAL INACTIVE MILITARY SERVICE

B. AGREEMENTS

8. I am enlisting/reenlisting in the United States (list branch of service)

   this date for ________ years ________ months and ________ weeks beginning in pay grade

   of which ________ years ________ months and ________ weeks is considered an Active Duty Obligation, and

   ________ years ________ months and ________ weeks will be served in the Reserve Component of the Service in which I have enlisted.

   If this is an initial enlistment, I must serve a total of eight (8) years, unless I am sooner discharged or otherwise extended by the appropriate authority. This eight
   year service requirement is called the Military Service Obligation. The additional details of my enlistment/reenlistment are in Section C and Annex(es) (list name
   of Annex(es) and describe)

a. FOR ENLISTMENT IN A DELAYED ENTRY/ENLISTMENT PROGRAM (DEP):

   I understand that I am joining the DEP. I understand that by joining the DEP I am enlisting in the Ready Reserve component of the

   United States (list branch of service) ________________ for a period not to exceed

   365 days, unless this period of time is otherwise extended by the Secretary concerned. While in the DEP, I understand that I am in a nonpay status and that I
   am not entitled to any benefits or privileges as a member of the Ready Reserve, to include, but not limited to medical care, liability insurance, death benefits,
   education benefits, or disability retired pay if I incur a physical disability. I understand that the period of time while I am in the DEP is NOT creditable for pay
   purposes upon entry into a pay status. However, I also understand that the period of time while I am in the DEP is counted toward fulfillment of my military
   service obligation described in paragraph 10, below. While in the DEP, I understand that I must maintain my current qualifications and keep my recruiter
   informed of any changes in my physical or dependency status, qualifications, and mailing address. I understand that I WILL be ordered
   to active duty unless I report to the place shown in item 4 above by (list date (YYYYMMDD)) ________________ for enlistment in the Regular component
   of the United States (list branch of service) ________________ for not less than

   ________ years ________________ months and ________________ weeks.

b. REMARKS: (If none, so state.)

c. The agreements in this section and attached annex(es) are all the promises made to me by the Government. ANYTHING ELSE ANYONE HAS PROMISED
   ME IS NOT VALID AND WILL NOT BE HONORED.

(Initials of Enlistee/Reenlistee)

DD FORM 4, MAY 2020

PREVIOUS EDITION IS OBSOLETE.

Enclosure (1)
PRIVACY ACT STATEMENT FOR DD FORM 4


PRINCIPAL PURPOSE(S): To record enlistment or reenlistment into the U.S. Armed Forces. This information becomes a part of the subject’s military personnel records which are used to document promotion, reassignment, training, medical support, and other personnel management actions. The purpose of soliciting the Social Security Number (SSN) and the Electronic Data Interchange Personal Identifier (EDIP), is for positive identification.

ROUTINE USE(S): This form becomes a part of the Service’s Enlisted Master File and Field Personnel File. All uses of the form are internal to the relevant Service. FOR ALL APPLICANTS: SSN collection is only authorized for newly enlisting military service members. SSN collection is not authorized for current military personnel reenlisting in the Armed Forces. The EDIP/DoD identification number should be used to identify the records of these individuals. Additional routine uses are listed in the applicable system of records notice:


DISCLOSURE: Voluntary; however, failure to furnish personal identification information may negate the enlistment/reenlistment application.

WARNING

Information provided by you on this form is FOR OFFICIAL USE ONLY and will be maintained and used in strict compliance with Federal laws and regulations. The information provided by you becomes the property of the United States Government, and it may be consulted throughout your military service career, particularly whenever either favorable or adverse administrative or disciplinary actions related to you are involved. YOU CAN BE PUNISHED BY FINE, IMPRISONMENT OR BOTH IF YOU ARE FOUND GUILTY OF MAKING KNOWING AND WILLFUL FALSE STATEMENT ON THIS DOCUMENT.

INSTRUCTIONS
(Read carefully BEFORE filling out this form.)

1. Read Privacy Act Statement above before completing form.

2. Type or print LEGIBLY all answers. If the answer is "None" or "Not Applicable", so state. "Optional" questions may be left blank.

3. Unless otherwise specified, write all dates as 8 digits (with no spaces or marks) in YYYYYMMDD fashion. June 1, 2014 is written 20140601.

DD FORM 4, MAY 2020
C. PARTIAL STATEMENT OF EXISTING UNITED STATES LAWS

9. FOR ALL ENLISTEES OR REENLISTEES:

I understand that many laws, regulations, and military customs will govern my conduct and require me to do things under this agreement that a civilian does not have to do. I also understand that various laws, some of which are listed in this agreement, directly affect this enlistment/reenlistment agreement. Some examples of how existing laws may affect this agreement are explained in paragraphs 10 and 11. I understand that I cannot change these laws but that Congress may change these laws, or pass new laws, at any time that may affect this agreement, and that I will be subject to those laws and any changes they make to this agreement. I further understand that:

a. My enlistment/reenlistment agreement is more than an employment agreement. It affects a change in status from civilian to military member of the Armed Forces. As a member of the Armed Forces of the United States, I will be:

(1) Required to obey all lawful orders and perform all assigned duties.

(2) Subject to separation during or at the end of my enlistment. If my behavior fails to meet acceptable military standards, I may be discharged and given a certificate for less than honorable service, which may hurt my future job opportunities and my claim for veteran’s benefits.

(3) Subject to the military justice system, which means, among other things, that I may be tried by military courts-martial.

(4) Required upon order to serve in combat or other hazardous situations.

(5) Entitled to receive pay, allowances, and other benefits as provided by law and regulation.

b. Laws and regulations that govern military personnel may change without notice to me. Such changes may affect my status, pay, allowances, benefits, and responsibilities as a member of the Armed Forces REGARDLESS of the provisions of this enlistment/reenlistment document.

10. MILITARY SERVICE OBLIGATION, SERVICE ON ACTIVE DUTY AND STOP-LOSS FOR ALL MEMBERS OF THE ACTIVE AND RESERVE COMPONENTS, INCLUDING THE NATIONAL GUARD.

a. FOR ALL ENLISTEES: If this is my initial enlistment, I must serve a total of eight (8) years, unless I am sooner discharged or otherwise extended by the appropriate authority. This eight year service requirement is called the Military Service Obligation. Any part of that service not served on active duty must be served in the Reserve Component of the service in which I have enlisted. If this is a reenlistment, I must serve the number of years specified in this agreement, unless I am sooner discharged or otherwise extended by the appropriate authority. Some laws that affect when I may be ordered to serve on active duty, the length of my service on active duty, and the length of my service in the Reserve Component, even beyond the eight years of my Military Service Obligation, are discussed in the following paragraphs.

b. I understand that I can be ordered to active duty at any time while I am a member of the DEP. In a time of war, my enlistment may be extended without my consent for the duration of the war and for six months after its end (10 U.S.C. 506, 12103(c)).

c. As a member of a Reserve Component of an Armed Force, in time of war or of national emergency declared by the Congress, I may, without my consent, be ordered to serve on active duty, for the entire period of the war or emergency and for six (6) months after its end (10 U.S.C. 12301(a)). My enlistment may be extended during this period without my consent (10 U.S.C. 12103(c)).

d. As a member of the Ready Reserve (to include Delayed Entry Program), in time of national emergency declared by the President, I may, without my consent, be ordered to serve on active duty, and my military service may be extended without my consent, for not more than 24 consecutive months (10 U.S.C. 12302). My enlistment may be extended during this period without my consent (see paragraph 10g).

e. As a member of the Ready Reserve, I may, at any time and without my consent, be ordered to active duty to complete a total of 24 months of active duty, and my enlistment may be extended so I can complete the total of 24 months of active duty, if:

(1) I am not assigned to, or participating unsatisfactorily in, a unit of the Ready Reserve, and

(2) I have not met my Reserve obligation; and

(3) I have not served on active duty for a total of 24 months (10 U.S.C. 12303).

f. As a member of the Selected Reserve or as a member of the Individual Ready Reserve mobilization category, when the President determines that it is necessary to augment the active forces for any operational mission or for certain emergencies, I may, without my consent, be ordered to active duty for not more than 365 days (10 U.S.C. 12304). My enlistment may be extended during this period without my consent (see paragraph 10g).

g. During any period members of a Reserve component are serving on active duty pursuant to an order to active duty under authority of 10 U.S.C. 12301, 12302, or 12304, the President may suspend any provision of law relating to my promotion, retirement, or separation from the Armed Forces if he or his designee determines I am essential to the national security of the United States. Such an action may result in an extension, without my consent, of the length of service specified in this agreement. Such an extension is often called a “stop-loss” extension (10 U.S.C. 12305).

h. I may, without my consent, be ordered to perform additional active duty training for not more than 45 days if I have not fulfilled my military service obligation and fail in any year to perform the required training duty satisfactorily. If the failure occurs during the last year of my required membership in the Ready Reserves, my enlistment may be extended until I perform that additional duty, but not for more than six months (10 U.S.C. 10148).

11. FOR ENLISTEES/REENLISTEES IN THE NAVY, MARINE CORPS, OR COAST GUARD: I understand that if I am serving on a naval vessel in foreign waters, and my enlistment expires, I will be returned to the United States for discharge as soon as possible consistent with my desires. However, if essential to the public interest, I understand that I may be retained on active duty until the vessel returns to the United States. If I am retained under these circumstances, I understand I will be discharged not later than 30 days after my return to the United States; and, that except in time of war, I will be entitled to an increase in basic pay of 25 percent from the date my enlistment expires to the date of my discharge.

12. FOR ALL MALE APPLICANTS: Completion of this form constitutes registration with the Selective Service System in accordance with the Military Selective Service Act. Incident thereto the Department of Defense may transmit my name, permanent address, military address, Social Security Number, and birthdate to the Selective Service System for recording as evidence of the registration.

(Initials of Enlisted/Reenlisted)
### D. CERTIFICATION AND ACCEPTANCE

13a. My acceptance for enlistment is based on the information I have given in my application for enlistment. If any of that information is false or incorrect, this enlistment may be voided or terminated administratively by the Government or I may be tried by a Federal, civilian, or military court and, if found guilty, may be punished.

I certify that I have carefully read this document, including the partial statement of existing United States laws in Section C and how they may affect this agreement. Any questions I had were explained to my satisfaction. I fully understand that only those agreements in Section B and Section C of this document or recorded on the attached annex(es) will be honored. I also understand that any other promises or guarantees made to me by anyone that are not set forth in Section B or the attached annex(es) are not effective and will not be honored.

<table>
<thead>
<tr>
<th>b. SIGNATURE OF ENLISTEE/REENLISTEE</th>
<th>c. DATE SIGNED (YYYYMMDD)</th>
</tr>
</thead>
</table>

### 14. SERVICE REPRESENTATIVE CERTIFICATION

a. On behalf of the United States (list branch of service)

I accept this applicant for enlistment. I have witnessed the signature in item 13b to this document. I certify that I have explained that only those agreements in Section B of this form and in the attached Annex(es) will be honored, and any other promises made by any person are not effective and will not be honored.

<table>
<thead>
<tr>
<th>b. NAME (Last, First, Middle)</th>
<th>c. PAY GRADE</th>
<th>d. UNIT/COMMAND NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>e. SIGNATURE</td>
<td>f. DATE SIGNED (YYYYMMDD)</td>
<td>g. UNIT/COMMAND ADDRESS (City, State, ZIP Code)</td>
</tr>
</tbody>
</table>

### E. CONFIRMATION OF ENLISTMENT OR REENLISTMENT

15. IN THE ARMED FORCES EXCEPT THE NATIONAL GUARD (ARMY OR AIR):

I, _____________________________, do solemnly swear (or affirm) that I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; and that I will obey the orders of the President of the United States and the orders of the officers appointed over me, according to regulations and the Uniform Code of Military Justice. So help me God.

16. IN THE NATIONAL GUARD (ARMY OR AIR):

I, _____________________________, do solemnly swear (or affirm) that I will support and defend the Constitution of the United States and the State of ___________________________, against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; and that I will obey the orders of the President of the United States and the Governor of ___________________________ and the orders of the officers appointed over me, according to law and regulations. So help me God.

17. IN THE NATIONAL GUARD (ARMY OR AIR):

I do hereby acknowledge to have voluntarily enlisted/reenlisted this ___________________________ day of ___________________________ in the ___________________________ National Guard and as a Reserve of the United States (list branch of service) with membership in the National Guard of the United States for a period of ____________ years, ____________ months, ____________ weeks, ____________ days, under the conditions prescribed by law, unless sooner discharged by proper authority.

<table>
<thead>
<tr>
<th>18a. SIGNATURE OF ENLISTEE/REENLISTEE</th>
<th>b. DATE SIGNED (YYYYMMDD)</th>
</tr>
</thead>
</table>

### 19. ENLISTMENT/REENLISTMENT OFFICER CERTIFICATION

a. The above oath was administered, subscribed, and duly sworn to (or affirmed) before me this date.

<table>
<thead>
<tr>
<th>b. NAME (Last, First, Middle)</th>
<th>c. PAY GRADE</th>
<th>d. UNIT/COMMAND NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>e. SIGNATURE</td>
<td>f. DATE SIGNED (YYYYMMDD)</td>
<td>g. UNIT/COMMAND ADDRESS (City, State, ZIP Code)</td>
</tr>
</tbody>
</table>

(Initials of Enlistee/Reenlistee)

DD FORM 4, MAY 2020

PREVIOUS EDITION IS OBSOLETE.
F. DISCHARGE FROM/DELAYED ENTRY/ENLISTMENT PROGRAM

20a. I request to be discharged from the Delayed Entry/Enlistment Program (DEP) and enlisted in the Regular Component of the

United States (list branch of service) __________________________ for a period of __________________ years and __________________ weeks. No changes have been made to my enlistment options OR if changes were made they are recorded on

Annex(es) __________________________________________________

which replace(s) Annex(es) ____________________________________

b. SIGNATURE OF DELAYED ENTRY/ENLISTMENT PROGRAM ENLISTEE

c. DATE SIGNED (YYYYMMDD)

G. APPROVAL AND ACCEPTANCE BY SERVICE REPRESENTATIVE

21. SERVICE REPRESENTATIVE CERTIFICATION

a. This enlistee is discharged from the Reserve Component shown in item 8 and is accepted for enlistment in the Regular Component of the United States (list branch of service) __________________________ in pay grade __________

b. NAME (Last, First, Middle) __________________________

c. PAY GRADE __________________________

d. UNIT/COMMAND NAME __________________________

e. SIGNATURE __________________________

f. DATE SIGNED (YYYYMMDD) __________________________

g. UNIT/COMMAND ADDRESS (City, State, ZIP Code) __________________________

H. CONFIRMATION OF ENLISTMENT OR REENLISTMENT

22a. IN A REGULAR COMPONENT OF THE ARMED FORCES:

I, __________________________, do solemnly swear (or affirm) that I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; and that I will obey the orders of the President of the United States and the orders of the officers appointed over me, according to regulations and the Uniform Code of Military Justice. So help me God.

b. SIGNATURE OF ENLISTEE/REENLISTEE __________________________

c. DATE SIGNED (YYYYMMDD) __________________________

23. ENLISTMENT OFFICER CERTIFICATION

a. The above oath was administered, subscribed, and duly sworn to (or affirmed) before me this date.

b. NAME (Last, First, Middle) __________________________

c. PAY GRADE __________________________

d. UNIT/COMMAND NAME __________________________

e. SIGNATURE __________________________

f. DATE SIGNED (YYYYMMDD) __________________________

g. UNIT/COMMAND ADDRESS (City, State, ZIP Code) __________________________

(Initials of Enlistee/Reenlistee) __________________________
Executive Summary of Changes – 2020 Revision

DD Form 4
“Enlistment/Reenlistment Document
Armed Forces of the United States”

PRIVACY ACT STATEMENT
• The Privacy Act Statement was moved to the back of page 1 in order to be able to expand on the Routine Uses.

AUTHORITY
• The authorities were thoroughly reviewed and aligned with the purposes of the DD Form 4. There were originally 51 authorities that were too broad and did not necessarily pertain to enlistment; we ended up with 24 authorities that speak directly to enlistment. This was done in conjunction with and by the recommendation of OSD/WHS/ESD, Records, Privacy and Declassification Division.

PRINCIPAL PURPOSE (S)
• Added “…and the Electronic Data Interchange Personal Identifier (EDIP)I)” to the sentence for the purpose of positive identification.

ROUTINE USE (S)
• Changed sentence to say: “SSN collection is only authorized for newly enlisting military service members. SSN collection is not authorized for current military personnel reenlisting in the Armed Forces. The EDIPI / DoD identification number should be used to identify the records of these individuals” per the Chief, Defense Privacy, Civil Liberties, and Transparency Division
• Updated to reflect all the Services’ SORNs and their links.

WARNING – was added.

INSTRUCTIONS – was added.

A. ENLISTEE/REENLISTEE IDENTIFICATION DATA – split item #2 to have both SSN and DoDID. Note: next revision might not have the SSN.
• 2a. SSN to be used for new contracts only.
• 2b. DoD ID Number to be used for reenlistments.

Section A, Item 5:
• added a drop down menu with the following choices:
  1) Enlistment (Active Component)
  2) Enlistment (Reserve Component)
  3) Reenlistment (Active Component)
  4) Reenlistment (Reserve Component)
Justification: under the prior version of Section A, Item 5, there was no way to determine whether the action that occurred was an enlistment or a reenlistment.

B. AGREEMENTS
• a. added the choice of weeks through this section as per Air Force request.

E. CONFIRMATION OF ENLISTMENT OR REENLISTMENT
• a. added the choice of weeks through this section as per Air Force request.

OTHER
• No changes