

CERTIFICATE OF ELIGIBILITY FOR GEORGIA NATIONAL GUARD DRIVER'S LICENSE

INSTRUCTIONS:

- As a Georgia resident and member of the Georgia National Guard, I hereby apply for a "National Guard" Driver's License as provided for in Georgia Code Title 40-5-36, as amended.
- **PART I:** The Georgia National Guard must complete and sign it in the presence of a representative of a local National Guard Commanding Officer.
- **PART II:** To be completed by a local National Guard Commanding Officer.
- Take completed form to the Department of Driver Services (DDS) Customer Service Center. In addition to identification verification, DDS may review the documentation presented to the Georgia National Guard in obtaining the certification.

PARTI				
Applicant				
 First Name	Middle		Last Name	
Current Address: (Street)		(City)	(State)	(Zip)
Current Driver's License #			SSN#	
N.G. SERVICE #			N.G. UNIT	
N.G. UNIT Address: (Street)	(City)	(State)	(Zip)
License must be surrendered upon issuance of PART II (To be com CERTIFICATION: The info Date Entered National Guard		lational Guard Cor)
"I certify the information provided by me on this and correct." Witness's Signature:	s application is true		certified to be a membe l Guard and is entitled to	
Date:		By:(Ranl	<) (Authoriz	zing Official's Name)
State and federal law provide severe penalties, simprisonment, or both, for the willful submissio statement or evidence of a material fact.		Office Address: Date:		