


MEMBER BIOGRAPHICAL DATASHEET

WOMEN MARINES ASSOCIATION
 EDITH MACIAS VANN SOUTHERN CALIFORNIA CHAPTER

Members Information			
Name; First:		M/I:	Last:
Address:			
City:		State:	Zip Code:
Maiden/Service Name:			
Date of Birth:		Home Phone:	Cell Phone:
E-Mail (Pri):		E-Mail (Alt):	
Educational Background			
High School Name:		City, State:	
College/University:		Bachelors:	Arts Sci
City, State:		Discipline:	
University:		Masters:	Arts Sci
City, State:		Discipline:	
University:		Doctorate:	MD PhD Oth
City, State:		Discipline:	
Marine Corps Information			
Service Dates: (Retire?)		From:	To:
Place of Enlistment:		City:	State:
Highest Rank Obtained:			DOR:
Military Occupational Specialty:		(P)	(A)/(A)
Duty Stations:		(1)	(2)
(3)		(4)	(5)
Recognitions, Awards, etc:		(1)	(2)
(3)		(4)	(5)
Family History			
Parents/Guardian Names:			
Siblings Name(s):			
Emergency POC Name:			
Address:			Phone:
City:		State:	Zip Code:
Relationship:			
Other Information			
Chapter Information >>		Date Joined:	Member #:
National WMA Information >>		Date Joined: Life?	Member #:
Offices Held:			
Other Information (optionally enclose additional information on separate page(s) as desired; i.e., Post Marine Corps Work History, Interests, Volunteer Activities, Other Biographical Information of Interest/Importance, Pictures, Awards, etc.):			
Signature:			Date: