**REQUEST FOR SAILOR/MARINE AMERICAN COUNCIL ON EDUCATION REGISTRY TRANSCRIPT**

**DATA REQUIRED BY THE PRIVACY ACT OF 1974**

**AUTHORITY**  
10 USC, Section 4302.

**ROUTINE USES**  
Upon initiation of individual.

**PRINCIPAL PURPOSES**  
To enable the Sailor/Marine American Council on Education Registry Transcript (SMART) System to access its computerized files, retrieve data, and produce a transcript for forwarding to individual or other addressee designated by the individual. Use of Social Security Number (SSN) is necessary to make positive identification of individual and records.

**DISCLOSURE**  
Voluntary. Failure to provide required information will complicate, delay, and/or prevent administrative actions needed to produce the transcript and forward it to desired addressee.

**ELIGIBLE**  
1. Active duty and Reserve Sailors/Marines.  

**MAIL TO:**  
Navy College Center, Code N27, VOLED Detachment, Center for Personal Development  
6490 Saufley Field Rd, Pensacola, FL 32509-5204  
FAX TO: 850-452-1909  
DSN 922-1909

**QUESTIONS:**  
DSN 922-1001x1236/1097  
Commercial: 850-451-1001x1236/1097

**WEB SITE:**  
https://smart.navymil

**E-MAIL:**  
sfly_smart@navy.mil

**PRIVACY ACT INFORMATION – PLEASE TYPE OR PRINT LEGIBLY**

<table>
<thead>
<tr>
<th><strong>1. NAME</strong> (Last, First, Middle Initial, Other names used)</th>
<th><strong>2. COMMAND ADDRESS</strong> (If active duty)</th>
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<tr>
<th><strong>3. RATE/RANK</strong></th>
<th><strong>4. SOCIAL SECURITY NUMBER</strong></th>
<th><strong>5. SIGNATURE AND DATE</strong></th>
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<tr>
<th><strong>6. BRANCH OF SERVICE</strong> (Circle One)</th>
<th><strong>7. CURRENT STATUS</strong> (Circle One)</th>
<th><strong>8. HOW DO WE CONTACT YOU?</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>a. NAVY</td>
<td>a. ACTIVE DUTY</td>
<td>HOME PHONE (<em><strong><strong>)</strong></strong></em>_____________________</td>
</tr>
<tr>
<td>b. MARINE CORPS</td>
<td>b. RESERVE</td>
<td>WORK PHONE (_<strong><strong>)</strong></strong>___________ DSN:_________________</td>
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<td>c. OTHER (Specify)_________________</td>
<td>c. SEPARATED</td>
<td>E-Mail:___________________________</td>
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<td>d. RETIRED</td>
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<tr>
<th><strong>9. PERSONAL COPY:</strong></th>
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<tbody>
<tr>
<td>CONNECT TO THE FOLLOWING WEB SITE TO GENERATE AND PRINT</td>
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<tr>
<td>YOUR SMART TRANSCRIPT.</td>
</tr>
<tr>
<td><a href="https://smart.navymil">https://smart.navymil</a></td>
</tr>
</tbody>
</table>

| **10. FOR OFFICIAL COPY TO BE SENT TO THE FOLLOWING EDUCATIONAL INSTITUTION:** |
| NAME OF EDUCATIONAL INSTITUTION: (No abbreviations) |
| ____________________________________________________ |
| ADDRESS:____________________________________________ |
| CITY, STATE:_________________________________________ |
| ZIP:_________________________________________________ |

**NOTE:** OFFICIAL SMART CANNOT BE SENT TO NAVY COLLEGE OFFICES, MARINE CORPS EDUCATION CENTERS OR OTHER SERVICES’ EDUCATION CENTERS

**FOR OFFICIAL USE ONLY**

**REMARKS/NOTES**

**PRINTED NAME AND SIGNATURE OF SMART OFFICE EMPLOYEE**  
DATE

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DRAFT NAVMC FORM (UPDATE 12 July 2006a)