

~~SECRET~~  
(When Filled In)

## QUALIFICATIONS UPDATE

(b) (3)

**READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING, TYPE OR PRINT, AVOID USING LIGHT COLORED INKS**

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room [ ] Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

### SECTION I BIOGRAPHIC AND POSITION DATA

EMP. SER. NO.	NAME (Last-First-Middle) <b>MILLS, Montrell E.</b>	DATE OF BIRTH <b>31 January 1924</b>	SD [ ]	GRADE <b>13</b>
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### SECTION II EDUCATION

<b>HIGH SCHOOL</b>			
LAST HIGH SCHOOL ATTENDED	ADDRESS (City, State, Country)	YEARS ATTENDED (From-To)	GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO

### COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM - TO - -	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/QTR. HRS. (Specify)
	MAJOR	MINOR				
1.						
2.						

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS. INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

### TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS

### OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
1.				
2.				

### SECTION III MARITAL STATUS

1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY:				
2. NAME OF SPOUSE		(Last)	(First)	(Middle) (Maiden)
3. DATE OF BIRTH	4. PLACE OF BIRTH (City, State, Country)			
5. OCCUPATION	6. PRESENT EMPLOYER			
7. CITIZENSHIP	8. FORMER CITIZENSHIP(S) COUNTRY(IES)		9. DATE U.S. CITIZENSHIP ACQUIRED	

### SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

	NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS
1.	<input type="checkbox"/> ADD <input type="checkbox"/> DELETE				
2.	<input type="checkbox"/> ADD <input type="checkbox"/> DELETE				

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SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL				KNOWLEDGE ACQUIRED BY--CHECK (X)			
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	RESIDENCE	TRAVEL	STUDY	WORK ASSIGNMENT
		FEB 4 10 55 AM '72					
1.							
2.							

SECTION VI TYPING AND STENOGRAPHIC SKILLS					
1. TYPING (WPM)	2. SHORTHAND (WPM)	3. INDICATE SHORTHAND SYSTEM USED--CHECK (X) APPROPRIATE ITEM.			
		<input type="checkbox"/> GREGG	<input type="checkbox"/> SPEEDWRITING	<input type="checkbox"/> STENOTYPE	<input type="checkbox"/> OTHER SPECIFY:

SECTION VII SPECIAL QUALIFICATIONS
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED.

SECTION VIII MILITARY SERVICE CURRENT DRAFT STATUS	
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED? <input type="checkbox"/> YES <input type="checkbox"/> NO	2. NEW CLASSIFICATION
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS	4. IF DEFERRED. GIVE REASON

MILITARY RESERVE, NATIONAL GUARD STATUS						
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG	<input type="checkbox"/> ARMY	<input type="checkbox"/> MARINE CORPS	<input type="checkbox"/> COAST GUARD	<input type="checkbox"/> NATIONAL GUARD		
	<input type="checkbox"/> NAVY	<input type="checkbox"/> AIR FORCE		<input type="checkbox"/> AIR NATIONAL GUARD		
1. CURRENT RANK, GRADE OR RATE	2. DATE OF APPOINTMENT IN CURRENT RANK	3. EXPIRATION DATE OF CURRENT OBLIGATION				
4. CHECK CURRENT RESERVE CATEGORY		<input type="checkbox"/> READY RESERVE	<input type="checkbox"/> STANDBY (active)	<input type="checkbox"/> STANDBY (inactive)	<input type="checkbox"/> RETIRED	<input type="checkbox"/> DISCHARGED
5. MILITARY MOBILIZATION ASSIGNMENT			6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED			

MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)			
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	DATE COMPLETED	
			RESIDENT
			AGENCY-SPONSORED

SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS		
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATE OF MEMBERSHIP
		FROM      TO
1.		
2.		
3.		

SECTION X REMARKS

DATE 10 Jan, '71	SIGNATURE OF EMPLOYEE <i>Robert M. Miller</i>
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