

California Military Department
GI Bill Award Program
Service Commitment Acknowledgement

I, _____, understand that I must serve two (2) years in the California National Guard, the California State Guard, or the California Naval Militia upon completion of the last academic period that I use educational assistance under the California Military Department GI Bill Award Program. Failure to serve the 2 years upon completion of the Program will result in recoupment of all funds received.

I can be reached at (Phone Number) _____ or (e-mail address) _____.

Signature _____

Date _____

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