



Instructions for DD Form 2875

Where to send your DD Form 2875

Air Force

Active Duty - lee.madison.4@us.af.mil

Reserve - christopher.modlin@us.af.mil

Guard - alexander.barajas.1@us.af.mil
arnett.dickson.1@us.af.mil

Army

Active Duty

USAREC - nicholas.j.harrison3.civ@army.mil

Reserve - rafe.t.wooten.mil@army.mil

Guard - ronnie.l.mitchum2.civ@army.mil

Navy

Active Duty - john.t.richard@navy.mil

Reserve - john.t.richard@navy.mil

Marine Corp

Active Duty - raul.guitron@marines.usmc.mil

Reserve - james.orton@marines.usmc.mil

Coast Guard

All - Steven.t.sisk@uscg.mil
scott.r.braithwaite@uscg.mil

Others not listed - dodhra.dodc-mb.dmdc.mbx.mris-helpdesk@mail.mil

Please fill in the following fields. The form will not be accepted without these responses:

PART I

TYPE OF REQUEST: Select the appropriate item

DATE: Enter the current date

SYSTEM NAME: Military Recruiter Information Suite (MRIS)

LOCATION: DMDC, Seaside, CA

Field - 1. NAME: Please enter your legal name. (Please, no nicknames or shortened version)

Field - 2. ORGANIZATION: Please enter your agency name. (Please, no acronyms; spell out completely.)

Field - 3. OFFICE SYMBOL/DEPARTMENT: Please enter your department, division or other office name.

Field - 4. PHONE: Please enter your business telephone number. If you have an extension, please also be sure to provide it. A DSN is also acceptable.

Field - 5. OFFICIAL E-MAIL ADDRESS: Please enter your official agency e-mail address. We cannot accept e-mail addresses such as Yahoo.com, Gmail.com or any other similar types of e-mail addresses.

Field - 6. JOB TITLE AND GRADE/RANK: Self-explanatory;

Field - 7. OFFICIAL MAILING ADDRESS: Please enter your agency official address.

Field - 8. CITIZENSHIP: Please enter the country or countries in which you are a current citizen.

Field - 9. DESIGNATION OF PERSON: Please check the appropriate selection that best identifies your relationship to the Department of Defense. If you are under

contract with the Department of Defense, please select “Contractor.” If you are active military, please select “Military”; otherwise, select “Civilian.”

Field - 10. IA TRAINING AND AWARENESS CERTIFICATION REQUIREMENTS: At this time, you may leave this blank.

Field - 11. USER SIGNATURE: Please type or print your name in the first portion of this box and digitally sign in the second portion.

Field - 12. DATE: Please enter the date you signed the form.

PART II

Field - 13. JUSTIFICATION FOR ACCESS: Please enter your official reason for needing access to the Military Recruiter Information Suite (MRIS).

- **Acceptable Examples:** “My boss told me that I need access to MRIS as part of my job responsibilities.”
- **Unacceptable Example:** “The system looks interesting and it might be useful someday.”

Field – 17. SUPERVISOR’S NAME: Please have your supervisor type their name in this box.

Field - 17a. SUPERVISOR’S E-MAIL ADDRESS: Please have your supervisor type their E-Mail address in this box.

Field – 17b. PHONE NUMBER: Please have your supervisor type their phone number in this box.

Field – 17c. SUPERVISOR’S ORGANIZATION/DEPARTMENT: Please have your supervisor type their Organization /Department in this box.

Field – 17d. SUPERVISOR’S SIGNATURE: Please have your supervisor digitally sign in this box.

Field – 17e. DATE: Please have your supervisor type the current date in this box.

Field - 20. NAME: Please enter your legal name. (Please, no nicknames or shortened version)

Field - 21. OPTIONAL INFORMATION: if not all of the sub fields are completed the Site Security Manager (SSM) will have to call for verification.

- **(Required** --- The Sub-System which you are requesting access to)
- **(Required** --- The DoD ID Number in this block is required. It is found on the reverse side of your CAC)

PART III

PART III: Please have your Security Manager fill in blocks 22 thru 26.

Field - 25. SECURITY MANAGER SIGNATURE. This must be a digital signature.