



718th Force Support Squadron

Application to Renew Dependent ID Card

Sponsor Information:

First Name

Last Name

E-mail Address

Phone Number

DOD ID
Number

Completed DD
Form 1172

Yes

No, please obtain before
submitting application.

Dependent Information:

First Name

Last Name

ID Expiration
Date

ID Card Lost/
Stolen

Yes, Complete lost
or stolen memo

No

Address:

Street
Address

City

State

ZIP Code

Dependent Children Information (If Applicable):

**1. Is the
Dependent
over 21**

Yes, go to question 2

Yes, enrolled in
Tricare Young Adult
Program

No

**2. Full time
student**

Yes, Letter from
registrar office
attached

No. AFI 36-3026
Vol 1. Table
4.4 Dependent 21
years of age
through 22, must be
a Full Time Student
to receive an ID.

Two Forms of Identification:

Primary Identity Source Document

Secondary Identity Source Document

Comments/Additional Email for Contact