Print Form

FORM APPROVED
O.M.B. 0703-0012

UNITED STATES MARINE CORPS
OFFICER SELECTION OFFICE

IN REPLY REFER TO

1131 _____

OSO _____

DATE: _____

Address _____

City _____ State _____ Zip Code _____

Phone Number _____

Dear Commanding Officer,

The person listed below has applied for enrollment in an officer training program of the Marine Corps, and has given your name as a reference.

This is a program leading to appointment to commissioned rank in the Marine Corps Reserve. In the selection of candidates for appointment as officers, decisions are made on the basis of all available relevant information regarding the applicant's background in terms of education, intelligence, experience and personal characteristics. For some of the qualities, subjective evaluations can be made from academic records, test results, and employment records. However, such intangible qualities as personal characteristics of the candidate can be best evaluated by the objective ratings of those persons who have personal knowledge of the candidate. To this end, I ask you to check the appropriate columns on the rating schedule on the reverse side of this letter. Also, would you please fill in the blanks with any information you consider pertinent and helpful to a panel of officers at Headquarters, U. S. Marine Corps, which must evaluate the officer potential of the applicant.

The information you furnish will be treated confidentially. This form is authorized by Marine Corps Order P1100.73 series. While you are not required to respond, your cooperation in this matter is greatly appreciated.

Enclosed is a return addressed, postage free envelope for your convenience in returning the rating schedule.

Sincerely,

INITIALS
OSO

LAST NAME
USMC

NAME OF APPLICANT
DATES OF ATTENDANCE
ADDRESS

Reset Form

Adobe Designer 8.0

The public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports (0703-0012), 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. PLEASE DO NOT return your application to the above address. Return completed application to the addresses shown on the application instruction sheet.

REFERENCE QUESTIONNAIRE INSTRUCTIONS

Evaluate the candidate on all sixteen of the factors listed below. Mark only one choice that best describes the qualities of the applicant in relation to those of his/her peers.

BASE YOUR EVALUATION ON THE FOLLOWING SCALE:

SUPERIOR - Outstanding potential based on demonstrated performance

ABOVE AVERAGE - Demonstrates capabilities ahead of peers

AVERAGE - Demonstrates capabilities typical of peers

BELOW AVERAGE - Capabilities on a lower scale than that of peers

INFERIOR - No capabilities or growth potential demonstrated

NOT OBSERVED - Insufficient contact to give an opinion

	SUPERIOR	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	INFERIOR	NOT OBSERVED
1. Academic Potential						
2. Respect Tendered by peers						
3. Ability to accept critcism by seniors						
4. Ability and willingnes to conform to established rules of conduct						
5. Ability to adapt to demands of close group-living						
6. Interest and willingness to accept responsibilities inextracurricular activities						
7. Ability to make friends easily						
8. Interest in participating in competitive situations						
9. Ability to work towards goal when in a subordinate positions						
10. Ability to influence others in definite lines of action						
11. Dexterity, agility, and physical coordination						
12. Ability to carry a demanding academic program at the college level						
13. Ability to deal with frustration						
14. Personal appearance						
15. Ability to communicate verbally						
16. How well interest and personality are related to a career in the military						

GENERAL COMMENTS - IN YOUR OWN WORDS, PLEASE GIVE A SUMMARY EVALUATION OF THE APPLICANT

"I understand, if SNM is selected for a commissioning program, that he/she is not required to mobilize for unit deployments as long as they remain in good standing and meet all requirements of the commissioning program or M&RA/MCRC policy changes."

HOW LONG HAVE YOU KNOWN THE APPLICANT	RELATIONSHIP TO THE APPLICANT (Professor, Employer, etc.)	
SIGNATURE	PROFESSION	NAME OF FIRM OR INSTITUTION

GENERALCOMMENTS (Cont.)