

ENLISTED TO OFFICER SAMPLE APPLICATION

This document provides instructions and forms to complete an Enlisted to Officer Application. Submit your completed application to e_boards@marines.usmc.mil via DoD SAFE at www.safe.apps.mil.

In DoD SAFE, select Drop-Off. Input the recipient email address (found above). Check the "Encrypt every file" box. Create an Encryption Passphrase and confirm. Attach the application and medical submission as two (2) separate pdf documents. Do not password protect the documents. Save the files as such:

PROGRAM LAST NAME_EDIP App (MECEP SMITH_1234567890 App)

PROGRAM LAST NAME_EDIP Med (ECP JONES_0123456789 Med)

In the "Short note to Recipients" area of DoD SAFE, annotate the following:

CY__ (Choose board - MECEP, ECP, RECP, MCP-R) Application ICO Rank LNAME, FNAME MI EDIP/PMOS.

After submission via DoD SAFE, send a follow-up email directly to the recipient with the passphrase you created. Passphrase should be the same for both files. We cannot download the attachments without the passphrase. The subject of the follow-up email should be the same as the "Short note" in DOD SAFE.

Your application must contain all required documents IN THE SAME ORDER as the checklist. In the event that DoD SAFE will not accommodate your submission, the application and medical documents can be sent in one unencrypted email to e_boards@marines.usmc.mil. The attachments must not exceed a combined file size of 8MB. In this case, please password protect the documents with the same password and send the password in a separate email. To assemble an application, use the steps and procedures below:

1. Read the current announcement MARADMIN for the program you are applying and MCO 1040.43B. These references outline program eligibility and requirements.
2. Complete and sign the application letter. Use the template letter provided. Ensure the subject of the letter is only the program to which you are applying.
3. The commander's first endorsement should follow the provided template as well. The remaining endorsements from the chain of command will follow standard naval formatting.
4. Ensure you read the instructions for each form in its entirety. Every form requires at least the applicant's signature. Many need to be signed by a witnessing officer as well.

5. Provide certified copies of the following Marine Corps Total Force System (MCTFS) screens: BIR/BTR, Awards, and Chronological Page.

6. If qualifying using the ACT or SAT, please provide official test scores report.

7. Use the template in the application to provide a signed security clearance verification letter. Security clearances must not expire prior to reporting to college (MECEP) or appointment (ECP/RECP/MCP-R). JPAS printouts ARE NOT authorized. If the status of an applicant's clearance changes (e.g. clearance suspended due to investigation), the security manager MUST contact MCRC POC immediately.

8. Complete the tattoo screening form and tattoo statement of understanding even if you do not have any tattoos. Provide COLOR photos or drawings (for tattoos that are located in private areas) of all tattoos, brands, body markings or body ornamentation. When measuring distances to prohibited areas as defined by MCBUL 1020 please ensure that all photos are of high quality and distances can be easily ascertained. Tattoo photos ARE required for all tattoos visible in warm weather PT gear. If covered in PT gear, a detailed drawing must be submitted. Also, provide any page 11 entries that document your tattoos. For tattoo removal please provide the following: photos of the tattoo(s) before the removal procedure was started; photos of the tattoo(s) after each removal session; and a statement from the provider who is removing the tattoo(s) indicating when treatment started, number of treatments required, and anticipated completion date.

9. If applicable, provide all non-judicial punishment(s) (NJPs) or 6105 Page 11 entries and a statement addressing the 5 W's of the incident(s).

10. Letters of recommendation should be addressed to the president of the board. Professional certificates/certifications outside of the military may be included with your application.

11. If you are a U.S. citizen and your BIR reflects your citizenship as "Alien", provide proof of citizenship. Per SECNAVINST 1412.11, you must be a citizen of the United States to be eligible for consideration on Officer Selection Boards. All foreign born must provide dual citizen SRB statement.

12. Please DO NOT provide any additional documents (e.g. unit checklists, MBSs, etc.) not requested on the checklist or required in the MARADMIN or MCO 1040.43B.

13. Route only the application for endorsement. Do not route the medical forms as this could become a HIPAA violation.

14. Parent commands ensure checklist is signed and dated.

E-O APPLICATION CHECKLIST

****ALL DOCUMENTS ON THIS CHECKLIST ARE REQUIRED EXCEPT THOSE ANNOTATING "IF APPLICABLE" OR WITH SPECIFIC REQUIREMENTS. APPLICATIONS MUST BE IN ORDER OF THIS CHECKLIST PRIOR TO FORWARDING.****

PROGRAM: MECEP ECP RECP MCP-R CONTRACT: GND SNA GENDER: M F

NAME: _____ Rank: _____ Marital Status: _____

SSN: _____ EDIPI/PMOS: _____ / _____ MCC: _____

_____ GENERAL OFFICER ENDORSEMENT

_____ COMMANDING OFFICER ENDORSEMENT(S)

_____ APPLICANT LETTER

_____ INTERVIEW BOARD REPORT

_____ PERSONAL ESSAY (ALL APPLICANTS) _____ AVIATION ESSAY (ECP SNA ONLY)

_____ MOL/MCTFS SCREENS:

_____ CHRO _____ TBIR _____ TBTR _____ TROS _____ AWARDS

_____ NAVMC 118 (11) ENTRIES:

_____ SRB STATEMENT

_____ DUAL CITIZEN STATEMENT (IF FOREIGN BORN)

_____ DEROGATORY (IF APPLICABLE)

_____ UNIT PUNISHMENT BOOK WITH ADDENDUM PAGE (IF APPLICABLE)

_____ LETTERS OF RECOMMENDATION (OPTIONAL)

_____ E-O DENTAL REQUIREMENT PRIOR TO OCS SOU

_____ ALL SIGNED DD FORM 4 (ENLISTMENT CONTRACTS) INITIAL ENTRY TO CURRENT

_____ SEXUAL ASSAULT AND HARASSMENT STATEMENT OF UNDERSTANDING

_____ NAVMC SERVICE AGREEMENTS

_____ 11877 MECEP GND

_____ 11872 ECP GND _____ 11873 ECP SNA

_____ 11875 RECP GND

_____ 11876 MCP-R GND

_____ APPROVED DD FORM 368 (MECEP AND ECP AR MARINES ONLY)

_____ SOCIAL SECURITY CARD (CERTIFIED TRUE COPY)

_____ PROOF OF US CITIZENSHIP

_____ SECURITY CLEARANCE VERIFICATION LETTER

_____ SPOUSE FMF STATEMENT (IF APPLICABLE)

_____ MARRIAGE CERTIFICATE AND/OR DIVORCE DECREE (IF APPLICABLE)

_____ RESTRICTIONS ON PERSONAL CONDUCT IN THE ARMED FORCES AND SEPARATION POLICY SOU

_____ MARINE CORPS POLICY CONCERNING USE OF DRUGS SOU

_____ MARINE CORPS POLICY CONCERNING FRATERNIZATION SOU

_____ SERVICE MEMBER CIVIL RELIEF ACT SOU

_____ NAVMC 11000 DATA REQUIRED BY THE PRIVACY ACT OF 1974

_____ TATTOO SOU

_____ MOS SOU

_____ OFFICIAL TEST SCORES (MUST HAVE 1 OF THE TOP 3)

_____ 74 AFQT COMBINED SCORE MINIMUM

_____ 1000 SAT SCORE MINIMUM

_____ 22 ACT COMPOSITE SCORE MINIMUM

_____ 4 AQR AND 6 PFAR ASTB SCORE MINIMUM (ECP SNA ONLY)

_____ CURRENT COLLEGE TRANSCRIPTS: _____ ASSOCIATES _____ BACHELORS _____ MASTERS

_____ INFORMATION SHEET WITH PRIVACY ACT

_____ ADDENDUM TO APPLICATION FOR HANDWRITTEN STATEMENT

_____ TATTOO SCREENING FORM

_____ COLOR PHOTO(S) OF BODY MARKINGS (TATTOO, PIERCINGS, BRANDS, ETC)

_____ COLOR 4-ANGLE PHOTOS

_____ DRUG STATEMENT FORM

_____ NON-TRAFFIC ARREST FORM (REFER TO MARADMIN FOR SUPPORTING DOCUMENTATION REQUIREMENTS AND EXCEPTIONS)

_____ MINOR TRAFFIC FORM (REFER TO MARADMIN FOR SUPPORTING DOCUMENTATION REQUIREMENTS AND EXCEPTIONS)

_____ MEDICAL VERIFICATION LETTER

BELOW MUST BE INITIALED AND DATED TO VERIFY EACH PARENT COMMAND LEVEL ENSURED APPLICATION MET PROGRAM REQUIREMENTS

COMMANDING OFFICER _____ APPLICATION PROGRAM REQUIREMENTS VERIFIED _____ DATE

COMMAND ADMIN SECTION _____ APPLICATION PROGRAM REQUIREMENTS VERIFIED _____ DATE

OFFICER IN CHARGE _____ APPLICATION PROGRAM REQUIREMENTS VERIFIED _____ DATE

****MEDICAL (REFER TO CURRENT BOARD ANNOUNCEMENT MARADMIN FOR REQUIREMENTS)****

2808 2807 IMR DENTAL HIV PHA PAP

Enclosure (1)



UNITED STATES MARINE CORPS

UNIT LETTERHEAD
STREET
CITY ST 12345-1234

1040
Code

Date

THIRD ENDORSEMENT on (Rank Full Name)'s (MECEP/ECP/RECP/MCP-R) application of (Date)

From: Commanding General

To: Commanding General, Marine Corps Recruiting Command (ON/E)

Subj: APPLICATION FOR CONSIDERATION FOR THE CALENDAR YEAR 20XX (MARINE CORPS
ENLISTED COMMISSIONING EDUCATION PROGRAM/ENLISTED COMMISSIONING
PROGRAM/RESERVE ENLISTED COMMISSIONING PROGRAM/MERITORIOUS
COMMISSIONING PROGRAM – RESERVE)

1. Forwarded, recommended with (appropriate recommendation).
2. (Rank Last Name) state reasons for recommendation. I rank this Marine ____ of ____ applying for (MECEP/ECP/RECP/MCP-R).
3. Point of contact for this matter is (Rank Full Name), commercial telephone numbers and electronic mail address.
(Note: Ensure POC is able to respond in a timely nature for board related issues)

C. G. UNIT OR EQUIVALENT



UNITED STATES MARINE CORPS

UNIT LETTERHEAD
STREET
CITY ST 12345-1234

1040
Code
Date

SECOND ENDORSEMENT on (Rank Full Name)'s (MECEP/ECP/RECP/MCP-R) application of (Date)

From: Commanding Officer

To: Commanding General, Marine Corps Recruiting Command (ON/E)

Via: Commanding General, (Unit Name)

Subj: APPLICATION FOR CONSIDERATION FOR THE CALENDAR YEAR 20XX (MARINE CORPS
ENLISTED COMMISSIONING EDUCATION PROGRAM/ENLISTED COMMISSIONING
PROGRAM/RESERVE ENLISTED COMMISSIONING PROGRAM/MERITORIOUS
COMMISSIONING PROGRAM – RESERVE)

1. Forwarded, recommended with (appropriate recommendation).
2. (Rank Last Name) state reasons for recommendation. I rank this Marine ___ of ___ applying for (MECEP/ECP/RECP/MCP-R).
3. Point of contact for this matter is (Rank Full Name), commercial telephone numbers and electronic mail address. (Note: Ensure POC is able to respond in a timely nature for board related issues)

C. O. UNIT OR EQUIVALENT



UNITED STATES MARINE CORPS

UNIT LETTERHEAD
STREET
CITY ST 12345-1234

1040
Code
Date

FIRST ENDORSEMENT on (Rank Full Name)'s (MECEP/ECP/RECP/MCP-R) application of (Date)

From: Commanding Officer

To: Commanding General, Marine Corps Recruiting Command (ON/E)

Via: (1) Commanding Officer, (Unit)
(2) Commanding General, (Unit Name)

Subj: APPLICATION FOR CONSIDERATION FOR THE CALENDAR YEAR 20XX (MARINE CORPS
ENLISTED COMMISSIONING EDUCATION PROGRAM/ENLISTED COMMISSIONING
PROGRAM/RESERVE ENLISTED COMMISSIONING PROGRAM/MERITORIOUS
COMMISSIONING PROGRAM – RESERVE)

1. The information contained in the basic application and checklist have been verified with records on file in this command and have been found to be correct and true. The applicant meets the basic eligibility requirements for the (Marine Corps Enlisted Commissioning Program/Enlisted Commissioning Program/Reserve Enlisted Commissioning Program/Meritorious Commissioning Program – Reserve).
2. Applicant is medically qualified based on available medical documentation.
3. Provide a statement of recommendation with justification using recommend with (enthusiasm, confidence, or reservation).
4. The applicant has served in this command for ____ months and has ____ remaining on their current enlistment or extension.
5. (Rank Last Name) has met all requirements for security clearance eligibility per SECNAVINST 5510.30C and the current MCO 1040.43.
6. I have screened the applicant for body markings and they (do/do not) have body markings per the current MCO 1020.34. (If any body markings are present add the following) The Marine Corps Recruiting Command Tattoo Screening Form with color photographs wearing the green physical training uniform and description of all markings have been included with this application.
7. The applicant requires a waiver for (age, traffic offences, other non-traffic offense, misconduct offence, major misconduct offence, drug usage, or dependents). [Refer to the current MCRCO 1100.2 for waiver types]
8. Point of contact for this matter is (Rank Full Name), commercial telephone numbers and electronic mail address. (Note: Ensure POC is able to respond in a timely nature for board related issues)

C. O. UNIT OR EQUIVALENT

Date

From: Rank Full Name, EPIPI/PMOS, USMC(R)

To: Commanding General, Marine Corps Recruiting Command (ON/E)

Via: (1) Commanding Officer, (Unit)

(2) Commanding Officer, (Unit)

(3) Commanding General, (Unit Name)

Subj: APPLICATION FOR CONSIDERATION FOR THE CALENDAR YEAR 20XX (MARINE CORPS ENLISTED COMMISSIONING EDUCATION PROGRAM/ENLISTED COMMISSIONING PROGRAM/RESERVE ENLISTED COMMISSIONING PROGRAM/MERITORIOUS COMMISSIONING PROGRAM – RESERVE)

Ref: (a) (Current MCO 1040.43)

(b) (Current MARADMIN announcing the board)

Encl: (1) E-O Application Checklist

1. Per the references, I am eligible for and request consideration on the (Marine Corps Enlisted Commissioning Program/Enlisted Commissioning Program/Reserve Enlisted Commissioning Program/Meritorious Commissioning Program – Reserve). Enclosure (1) is provided.

2. I acknowledge that if NACLIC develops information that disqualifies me as an officer candidate I will be determined ineligible and disenrolled from the (MECEP/ECP/RECP/MCP-R).

3. [Non-MECEP Only] If I am selected and complete Officer Candidates School, I desire my commission to reflect the following:

Marital Status: (Single, Married, Separated, Divorced, or Widowed)

Gender: (Male or Female)

Service Agreement: (Ground, Student Naval Aviator)

Religious Preference: [See List on www.merc.marines.mil/Marine-Officer/Officer-Naval-Enlisted-Applicants/]

Race: [See List on ON/E Website]

Ethnicity: [See List on ON/E Website]

4. [ECP Student Naval Aviation Only] I am requesting an assignment as a student naval aviator upon commissioning. I am willing to accept a ground contract in the event there are no aviation vacancies, I do not meet aviation requirements, or I am found not medically qualified for aviation. [Ensure to include a personal narrative addressing "Why do I want to be a Marine Aviator?"]

5. Point of contact information is work commercial telephone number, personal cellular phone number, work electronic mail address, and personal electronic mail address. (Note: Ensure you are able to respond in a timely nature for board related issues)

APPLICANT SIGNATURE

INTERVIEW BOARD REPORT
(Refer to current MCO 1040.43 for board membership)

1. Command convening board (full address):
2. Applicant Rank Last, First M.I. EDIPI/MOS
3. Date of rank:
4. The applicant named above appeared before the interview board on (Date) and the following comments constitute the members opinion of a majority.
 - a. **MANNER, APPEARANCE, BEARING.** (Comment appropriately on the applicant's military presence, personal appearance, and bearing. Is it above, below, or at the standard generally expected of a Marine officer?)
 - b. **VOICE, LANGUAGE, EXPRESSION, ALERTNESS, ABILITY TO COMMUNICATE.** (Comment appropriately on the applicant's ability to project clear, concise, and intelligent expression. Does the applicant readily understand the meaning of questions?)
 - c. **PROFESSIONAL KNOWLEDGE.** (Comment on the applicant's military proficiency, general knowledge of the Marine Corps, social, and civic awareness.)
 - d. **SELF-CONFIDENCE, PERSONALITY, MOTIVATION.** (Comment on the applicant's degree of self-confidence, exhibited personality, motivation for subject program and commission.
 - e. **OTHER QUALIFICATIONS.** Identify qualifications not previously reported that would be of particular value as a commissioned officer.
5. RECOMMENDATION: (Rank Full Name) is (not) recommended with (enthusiasm, confidence, or reservation) for selection for the (MECEP, ECP, RECP, MCP-R) for assignment to attend a 10-week Officer Candidates School course in order to obtain a commission as a second lieutenant in the U.S. Marine Corps. (Make a summary evaluation of the applicant's qualifications and potential for completion of program requirements and anticipated commissioned service.)
6. INTERVIEW BOARD MEMBERS (must be commissioned officers):

Member: (List Rank Full Name and Signature for each board member)

SENIOR MEMBER SIGNATURE

PERSONAL ESSAY

Applicant must provide a narrative style essay for the following question:

Why do I want to be a Marine Corps Officer?

Essay should be between 90-100 words, but cannot exceed 100 words. If handwritten, essay must fit in the text box provided. Applicants are not restricted from writing about embodiment of the Marine Corps leadership traits and principles; however, statements that contain personal reflections, life experiences, motivation, and/or individual reasons for commissioning are highly encouraged.

“I certify that I have personally prepared this statement without any outside assistance.”

PERSONAL ESSAY FOR AVIATION

Applicant must provide a narrative style essay for the following question:

Why do I want to become a Marine Aviator?

Essay should be between 90-100 words, but cannot exceed 100 words. Applicants are not restricted from writing about the embodiment of the Marine Corps leadership traits and principles; however, statements that contain personal reflections, life experiences, motivation, and/or individual reasons for commissioning as a pilot are highly encouraged. Essay should be different than previous personal essay.

“I certify that I have personally prepared this statement without any outside assistance.”

MCTFS/MOL SCREENS

Print the following screens from Marine Corps Total Force System (MCTFS) or Marine Online (MOL) and include with your package:

- Chronological Record (CHRO)
- Basic Individual Record (TBIR)
- Basic Training Record (TBTR)
 - NAVMC 11622 to show updated PFT/CFT score not reflected in MCTFS
- Record of Service (TROS)
- Awards

Ensure EDIPI is annotated on each page and all pages have been certified true.

NAVMC 118 (11) ENTRIES

Required for all applicants:

- Selective Retention Bonus (SRB) Statement
- Derogatory Statements to include 6105 (If applicable)

Required if foreign born:

- Dual Citizen Statement (If applicable)

"I hereby express my willingness to renounce my (list foreign country) citizenship with all rights and privileges, if selected for the (applicable program). (If applicable) I further agree to turn in my (foreign county) passport to (foreign county) embassy and provide a receipt to my commanding officer, if selected for the (applicable program)."

Ensure applicable statement(s) are signed and dated.

Dual citizenship statement can be added to the same NAVMC 118 (11) as the SRB Statement. DO NOT submit any other NAVMC 118 (11) entries except for as specified above.

G

ADMINISTRATIVE REMARKS (1070)

DATE	DATE	DATE
Articles UCMJ explained to me this date as required by Article 137, UCMJ.	Articles UCMJ explained to me this date as required by Article 137, UCMJ.	I have been counseled concerning SBP and fully understand the automatic enrollment and future enrollment provisions on the Plan.
(Signature)	(Signature)	(Signature)

_____ I hereby acknowledge that I am not eligible for a SRB while pending selection to the (check program applying) _____ Marine Corps Enlisted Commissioning Education Program (MECEP), _____ Enlisted Commissioning Program (ECP) _____ Reserve Enlisted Commissioning Program (RECP) _____ Meritorious Commissioning Program - Reserve (MCP-R).

I understand that any extensions or reenlistments for the specific purpose of meeting service requirements for the MECEP, ECP, RECP, MCP-R do not entitle me to an SRB award incident to such reenlistment. If selected to the MECEP, ECP, RECP, MCP-R and do not complete the program, I understand that I am not entitled to an SRB award incident to the reenlistment.

SNM Signature

NAME (last, first, middle)	EDIPI

UNIT PUNISHMENT BOOK

Required only if applicable:

- Do not provide if no offenses
- Provide explanation for all offence on the Application and Program Information
Addendum Page

LETTERS OF RECOMMENDATION

Optional:

- Format is at the author's discretion
- Must explain why they feel the Marine should be given the opportunity to become a Marine Corps officer

**ENLISTED TO OFFICER APPLICANT STATEMENT OF UNDERSTANDING
REGARDING DENTAL REQUIREMENTS PRIOR TO ATTENDING OFFICER
CANDIDATES SCHOOL**

"I have been advised by my Commanding Officer that it is my personal responsibility to ensure that all dental defects are corrected and orthodontic appliances are removed prior to reporting to training. Failure to obtain a dental examination from a qualified dentist and correction of any deficiencies to include caries (cavities), partial plates, caps, root canals, and extractions may be grounds for my disenrollment prior to the commencement of training at Officer Candidates School, Quantico, Virginia".

APPLICANT'S SIGNATURE

WITNESSING OFFICER'S SIGNATURE

DATE

DATE

(The cursory dental check received at a Military Entrance Processing Station does not constitute a proper dental examination per the medical provisions of an Officer Candidates Program.)

DD FORM 4 ENLISTMENT/RE-ENLISTMENT CONTRACTS

All DD Form 4s from initial entry through current contract.

Each DD Form 4 shall be complete with initials on each page and signatures in all proper blocks.

All contracts should be found in the Marine's OMPF. Check all folders as contracts are not always uploaded under Service Contracts.

If a DD Form 4 is not available, must provide copy of approved Re-enlistment Extension Lateral Move (RELM) for that contract from Total Force Retention System (TFRS). RELMs are typically 4-5 pages long.

ANNEX A – SOU MC POLICY ON SEXUAL ASSAULT AND SEXUAL HARASSMENT

The MEPS LNCO certification is only for initial entry into the Marine Corps. No signature is required for enlisted to officer program applicants.

STATEMENT OF UNDERSTANDING

MARINE CORPS POLICY ON SEXUAL ASSAULT AND SEXUAL HARASSMENT

1. Purpose. The purpose of this document is a notification of the Marine Corps policy concerning sexual assault and sexual harassment.

2. Policy. Sexual assault and sexual harassment are prohibited in the United States Marine Corps. Furthermore, any instances of non-adherence to this policy by a Marine can result in disciplinary or administrative action.

- **Sexual Assault** is a crime defined as intentional sexual contact, characterized by use of force, physical threat or abuse of authority or when the victim does not or cannot consent.
- **Sexual Harassment** is a form of sex discrimination involving unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when:
 - Submission to such conduct is made either explicitly or implicitly a term or condition of a person's job, pay, or career, or
 - Submission to or rejection of such conduct by a person is used as a basis for career or employment decisions affecting that person, or
 - Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creates an intimidating, hostile, or offensive working environment

3. Certification. I certify that I understand the Marine Corps policy regarding sexual assault and sexual harassment; and that sexual assault and sexual harassment in the Marine Corps is prohibited. I understand that I am expected to report any instance of sexual assault or sexual harassment. Furthermore, the Marine Corps will conduct formal training about Sexual Assault Prevention and Response (SAPR) at recruit training and throughout assignments in the Marine Corps.

(Applicant's Signature)

(Date)

(Applicant's Printed Name)

(L4 Security Number)

4. Recruiter/OIC Verification. I verify that I have explained the Marine Corps policy on sexual assault and sexual harassment to the above named applicant.

(Witness's Signature)

(Date)

5. MEPS LNCO Certification. I certify the above named applicant understands the Marine Corps policy on sexual assault and sexual harassment.

(MEPS LNCO Signature)

(Date)

ANNEX (A)

SERVICE AGREEMENT

All applications require program specific ground agreement:

- NAVMC 11872 ECP Ground Service Agreement
- NAVMC 11875 RECP Ground Service Agreement
- NAVMC 11876 MCP-R Ground Service Agreement
- NAVMC 11877 MECEP Ground Service Agreement

Additionally, if applying for aviation (ECP Only):

- NAVMC 11873 ECP Aviation Service Agreement

Ensure all signature blocks are signed.

Name on the first page (Last, First MI, Suffix)

Full name on the signature page (Last, First Middle, Suffix)

Refer to current MCO 1040.43

Only submit the service agreement for the program which applying.

ECP SNA applications will be the only applications with two service agreements.

SERVICE AGREEMENT (1100)**MARINE ENLISTED COMMISSIONING EDUCATION PROGRAM GROUND****NAVMC 11877 (Rev 10-16) (EF)** (Previous editions are obsolete and will not be used)

FOUO - Privacy sensitive when filled in.

PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C. 5042, Headquarters, U.S. Marine Corps; 5 U.S.C. 301, Departmental Regulations; and E.O. 9397 (SSN) as amended; and [SORN M01133-3](#).

PURPOSE(S): To certify that the applicant acknowledges and understands all expectations of him/her upon enrollment in an Officer Program in the United States Marine Corps. This service agreement binds the individual to the terms set forth in the agreement upon signature.

ROUTINE USE(S): This information will be accessed by recruiters and DON officials with a need to know in support of requests for enlistment in the U.S. Marine Corps. Information may also be released to officials and employees of other departments and agencies of the Executive Branch of government, upon request, in the performance of their official duties related to the management of quality military recruitment and the recruitment of Marine personnel.

DISCLOSURE: Voluntary; however, failure to provide the requested information may result in an inability to process the individual for enlistment.

1. In connection with my application for enrollment in the **MARINE ENLISTED COMMISSIONING EDUCATION PROGRAM (MECEP) GROUND** program of the United States Marine Corps (USMC), I hereby acknowledge that:

a. Final approval of my application for enrollment in the **MECEP GROUND** program as an officer candidate will be determined by the Commandant of the Marine Corps (CMC).

b. Upon reporting for training to Officer Candidates School (OCS), I will be required to participate in training for a minimum of four (4) weeks of a 10-Week Commissioning Program, unless sooner disenrolled for cause, before any voluntary request for disenrollment will be considered.

(1) If I am disenrolled from OCS and not recommended for future attendance by the Commanding Officer of OCS, I will be disenrolled from the **MECEP GROUND** program.

(2) If I am disenrolled from OCS but recommended for future attendance by the Commanding Officer of OCS, I will be retained in the **MECEP GROUND** program and, when eligible, have the opportunity, if I desire, to attend the next available OCS 10 week training session.

(3) If I voluntarily disenroll from OCS at any time during the course of training, I will also be disenrolled from the **MECEP GROUND** program.

c. I am entitled to pay and allowances while attending OCS not less than those prescribed for pay grade E-5 or the highest pay grade achieved if I enter this obligation directly from current service at a pay grade above E-5.

d. Upon satisfactory completion of all commissioning requirements, I understand that I must choose to either accept or decline a commission if one is tendered to me, and that deferred acceptance is not authorized. If I decline commission, I will be disenrolled from the **MECEP GROUND** program and may request reenrollment to CMC, provided I remain otherwise qualified.

e. A commission in the USMC is held at the pleasure of the President of the United States.

f. Upon acceptance of a commission, I will incur a Military Service Obligation (MSO) of eight (8) years in the USMC from the date of appointment to commissioned grade;

(1) Any portion of this eight (8) year MSO not served on active duty will be served on inactive duty as a member of the Individual Ready Reserve (IRR) or as a member of the Selected Marine Corps Reserve (SMCR).

g. A resignation of my commission submitted prior to completion of this eight (8) year period will normally be rejected and, after this period, may be accepted or rejected by the President, as the needs of the service may then require.

h. Upon successful completion of OCS and acceptance of appointment to commissioned grade, I will be assigned the primary Military Occupational Specialty (MOS) 8001 (Ground) and further be assigned to The Basic School (TBS) for commissioned officer training.

i. Upon successful completion of TBS I will be further assigned to a follow-on Military Occupational Specialty (MOS) School.

2. I consent to serve on extended active duty for a minimum of thirty-six (36) months as a commissioned officer from completion of MOS school. I understand that a request for release from active duty prior to completion of this period will normally be rejected.

a. United States Code, Title 10, Chapter 39, Sections 671a and 671b currently provide as follows:

(1) 671a. Members: service extension during war. Unless terminated at an earlier date by the Secretary concerned, the period of active service of any member of an armed force is extended for the duration of any war in which the United States may be engaged and for six months thereafter.

(2) 671b. Members: service extension when Congress is not in session.

(a) Notwithstanding any other provision of law, when the President determines that the national interest so requires, he may, if Congress is not in session, having adjourned sine die, authorize the Secretary of Defense to extend for not more than six months enlistment, appointments, periods of active duty, periods of active duty for training, periods of obligated service, or other military status, in any component of the armed forces, that expire before the thirtieth day after Congress next convenes or reconvenes.

LAST NAME, FIRST AND MIDDLE INITIAL OF APPLICANT

FOR OFFICIAL USE ONLY

Privacy sensitive when filled in. Any misuse or unauthorized disclosure may result in both civil and criminal penalties.

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FOUO - Privacy sensitive when filled in.

(b) An extension under this section continues until the sixtieth day after Congress next convenes or reconvenes or until the expiration of the period of extension specified by the Secretary of Defense, whichever occurs earlier, unless sooner terminated by law or Executive order.

b. Federal statutes and pertinent regulations applicable to personnel in the USMC may change without notice. Such changes may affect my status as an officer candidate or commissioned officer and obligations to serve as such.

3. I certify that I have read and completely understand the meaning and content of the above. No promises, either written or oral, have been made to me in connection with my application for enrollment in the **MECEP GROUND** program except as specified above. I acknowledge receipt of a copy of this document.

Signature of Witnessing Officer

Signature of Applicant

Full Name and Grade of Witness

Full Name of Applicant

Date

SERVICE AGREEMENT - MARINE ENLISTED COMMISSIONING EDUCATION PROGRAM GROUND**FOR OFFICIAL USE ONLY****ANNEX C**

SERVICE AGREEMENT (1100) ENLISTED COMMISSIONING PROGRAM GROUND

NAVMC 11872 (Rev 10-16) (EF) (Previous editions are obsolete and will not be used)

FOUO - Privacy sensitive when filled in.

PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C. 5042, Headquarters, U.S. Marine Corps; 5 U.S.C. 301, Departmental Regulations; and E.O. 9397 (SSN) as amended; and [SORN M01133-3](#).

PURPOSE(S): To certify that the applicant acknowledges and understands all expectations of him/her upon enrollment in an Officer Program in the United States Marine Corps. This service agreement binds the individual to the terms set forth in the agreement upon signature.

ROUTINE USE(S): This information will be accessed by recruiters and DON officials with a need to know in support of requests for enlistment in the U.S. Marine Corps. Information may also be released to officials and employees of other departments and agencies of the Executive Branch of government, upon request, in the performance of their official duties related to the management of quality military recruitment and the recruitment of Marine personnel.

DISCLOSURE: Voluntary; however, failure to provide the requested information may result in an inability to process the individual for enlistment.

1. In connection with my application for enrollment in the **ENLISTED COMMISSIONING PROGRAM (ECP) GROUND** program of the United States Marine Corps (USMC), I hereby acknowledge that:

a. Final approval of my application for enrollment in the **ECP GROUND** program as an officer candidate will be determined by the Commandant of the Marine Corps (CMC).

b. Upon reporting for training to Officer Candidates School (OCS), I will be required to participate in training for a minimum of four (4) weeks of a 10-week commissioning program, unless sooner disenrolled for cause, before any voluntary request for disenrollment will be considered.

(1) If I am disenrolled from OCS and not recommended for future attendance by the Commanding Officer of OCS, I will be disenrolled from the **ECP GROUND** program.

(2) If I am disenrolled from OCS but recommended for future attendance by the Commanding Officer of OCS, I will be retained in the **ECP GROUND** program and, when eligible, have the opportunity, if I desire, to attend the next available OCS 10 week training session.

(3) If I voluntarily disenroll from OCS at any time during the course of training, I will also be disenrolled from the **ECP GROUND** program.

c. I am entitled to pay and allowances while attending OCS not less than those prescribed for pay grade E-5 or the highest pay grade achieved if I enter this obligation directly from current service at a pay grade above E-5.

d. Upon satisfactory completion of all commissioning requirements, I understand that I must choose to either accept or decline a commission if one is tendered to me, and that deferred acceptance is not authorized. If I decline commission, I will be disenrolled from the **ECP GROUND** program and may request reenrollment to CMC, provided I remain otherwise qualified.

e. A commission in the USMC is held at the pleasure of the President of the United States.

f. Upon acceptance of a commission, I will incur a Military Service Obligation (MSO) of eight (8) years in the USMC from the date of appointment to commissioned grade;

(1) Any portion of this eight (8) year MSO not served on active duty will be served on inactive duty as a member of the Individual Ready Reserve (IRR) or as a member of the Selected Marine Corps Reserve (SMCR).

g. A resignation of my commission submitted prior to completion of this eight (8) year period will normally be rejected and, after this period, may be accepted or rejected by the President, as the needs of the service may then require.

h. Upon successful completion of OCS and acceptance of appointment to commissioned grade, I will be assigned the primary Military Occupational Specialty (MOS) 8001 (Ground) and further be assigned to The Basic School (TBS) for commissioned officer training.

i. Upon successful completion of TBS I will be further assigned to a follow-on Military Occupational Specialty (MOS) School.

2. I consent to serve on extended active duty for a minimum of thirty-six (36) months as a commissioned officer from completion of MOS school. I understand that a request for release from active duty prior to completion of this period will normally be rejected.

a. United States Code, Title 10, Chapter 39, Sections 671a and 671b currently provide as follows:

(1) 671a. Members: service extension during war. Unless terminated at an earlier date by the Secretary concerned, the period of active service of any member of an armed force is extended for the duration of a war in which the United States may be engaged and for six months thereafter.

(2) 671b. Members: service extension when Congress is not in session.

(a) Notwithstanding any other provision of law, when the President determines that the national interest so requires, he may, if Congress is not in session, having adjourned sine die, authorize the Secretary of Defense to extend for not more than six months enlistment, appointments, periods of active duty, periods of active duty for training, periods of obligated service, or other military status, in any component of the armed forces, that expire before the thirtieth day after Congress next convenes or reconvenes.

LAST NAME, FIRST AND MIDDLE INITIAL OF APPLICANT

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Privacy sensitive when filled in. Any misuse or unauthorized disclosure may result in both civil and criminal penalties.

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FOUO - Privacy sensitive when filled in.

(b) An extension under this section continues until the sixtieth day after Congress next convenes or reconvenes or until the expiration of the period of extension specified by the Secretary of Defense, whichever occurs earlier, unless sooner terminated by law or Executive order.

b. Federal statutes and pertinent regulations applicable to personnel in the USMC may change without notice. Such changes may affect my status as an officer candidate or commissioned officer and obligations to serve as such.

3. I certify that I have read and completely understand the meaning and content of the above. No promises, either written or oral, have been made to me in connection with my application for enrollment in the **ECP GROUND** program except as specified above. I acknowledge receipt of a copy of this document.

Signature of Witnessing Officer

Signature of Applicant

Full Name and Grade of Witness

Full Name of Applicant

Date

SERVICE AGREEMENT - ENLISTED COMMISSIONING PROGRAM GROUND**FOR OFFICIAL USE ONLY****ANNEX C**

SERVICE AGREEMENT (1100)**ENLISTED COMMISSIONING PROGRAM STUDENT NAVAL AVIATOR****NAVMC 11873 (Rev 10-16) (EF)** (Previous editions are obsolete and will not be used)

FOUO - Privacy sensitive when filled in.

PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C. 5042, Headquarters, U.S. Marine Corps; 5 U.S.C. 301, Departmental Regulations; and E.O. 9397 (SSN) as amended; and [SORN M01133-3](#).

PURPOSE(S): To certify that the applicant acknowledges and understands all expectations of him/her upon enrollment in an Officer Program in the United States Marine Corps. This service agreement binds the individual to the terms set forth in the agreement upon signature.

ROUTINE USE(S): This information will be accessed by recruiters and DON officials with a need to know in support of requests for enlistment in the U.S. Marine Corps. Information may also be released to officials and employees of other departments and agencies of the Executive Branch of government, upon request, in the performance of their official duties related to the management of quality military recruitment and the recruitment of Marine personnel.

DISCLOSURE: Voluntary; however, failure to provide the requested information may result in an inability to process the individual for enlistment.

1. In connection with my application for enrollment in the **ENLISTED COMMISSIONING PROGRAM (ECP) STUDENT NAVAL AVIATOR (SNA)** program of the United States Marine Corps (USMC), I hereby acknowledge that:

a. Final approval of my application for enrollment in the **ECP SNA** program as an officer candidate will be determined by the Commandant of the Marine Corps (CMC).

b. Upon reporting for training to Officer Candidates School (OCS), I will be required to participate in training for a minimum of four (4) weeks of a 10-Week Commissioning Program, unless sooner disenrolled for cause, before any voluntary request for disenrollment will be considered.

(1) If I am disenrolled from OCS and not recommended for future attendance by the Commanding Officer of OCS, I will be disenrolled from the **ECP SNA** program.

(2) If I am disenrolled from OCS but recommended for future attendance by the Commanding Officer of OCS, I will be retained in the **ECP SNA** program and, when eligible, have the opportunity, if I desire, to attend the next available OCS 10 week training session.

(3) If I voluntarily disenroll from OCS at any time during the course of training, I will also be disenrolled from the **ECP SNA** program.

c. I am entitled to pay and allowances while attending OCS not less than those prescribed for pay grade E-5 or the highest pay grade achieved if I enter this obligation directly from current service at a pay grade above E-5.

d. Upon satisfactory completion of all commissioning requirements, I understand that I must choose to either accept or decline a commission if one is tendered to me, and that deferred acceptance is not authorized. If I decline commission, I will be disenrolled from the **ECP SNA** program and request reenrollment to CMC, provided I remain otherwise qualified.

e. A commission in the USMC is held at the pleasure of the President of the United States.

f. Once accepted into the **ECP SNA** program, I understand that I incur a Military Service Obligation (MSO) of eight (8) years in the USMC, from the effective date of my designation as a Naval Aviator.

(1) Any portion of this (8) year MSO not served on active duty will be served on inactive duty as a member of the Individual Ready Reserve (IRR) or as a member of the Selected Marine Corps Reserve (SMCR).

g. A resignation of my commission submitted prior to completion of my MSO will normally be rejected and, after this period, may be accepted or rejected by the President, as the needs of the service may then require.

h. Upon completion of OCS and acceptance of appointment to commissioned grade, I will be assigned primary Military Occupational Specialty (MOS) 7599 (Student Naval Aviator) and further be assigned to The Basic School (TBS) for commissioned officer training.

i. Upon successful completion of TBS, I will be assigned to the first available flight training class if I am physically qualified for such assignment when said class becomes available. Any projected delay in assignment to flight training may result in a temporary assignment to duties as dictated by the needs of the USMC until assignment to flight training can be effected.

j. After completion of TBS, any period of delay in assignment to flight training in excess of nine (9) months will be counted towards the ninety-six (96) month obligation, set forth in paragraph 2.a.

2. I consent to serve as a commissioned officer on extended active duty for the following minimum periods and understand that a request for release from active duty prior to completion of the minimum period will normally be rejected:

a. Ninety-six (96) months from the date of my successful completion of flight training and designation as a Naval Aviator; or

b. Forty-eight (48) months from date of appointment to commissioned grade if;

(1) I fail to meet the requirements for assignment to flight training; or

(2) I am separated from the flight training by reason of flight failure or physical disqualification (contingent upon approval from CMC).

LAST NAME, FIRST AND MIDDLE INITIAL OF APPLICANT

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(3) In addition to the forty-eight (48) month MSO, if I fail to meet the requirements for assignment to flight training as a result of my own request or by reason of academic failure, I agree to serve an additional extension of active service equal to the time spent in flight training (contingent upon approval from CMC).

c. United States Code, Title 10, Chapter 39, Sections 671a and 671b currently provide as follows:

(1) 671a. Members: service extension during war. Unless terminated at an earlier date by the Secretary concerned, the period of active service of any member of an armed force is extended for the duration of any war in which the United States may be engaged and for six months thereafter.

(2) 671b. Members: service extension when Congress is not in session.

(a) Notwithstanding any other provision of law, when the President determines that the national interest so requires, he may, if Congress is not in session, having adjourned sine die, authorize the Secretary of Defense to extend for not more than six months enlistment, appointments, periods of active duty, periods of active duty for training, periods of obligated service, or other military status, in any component of the armed forces, that expire before the thirtieth day after Congress next convenes or reconvenes.

(b) An extension under this section continues until the sixtieth day after Congress next convenes or reconvenes or until the expiration of the period of extension specified by the Secretary of Defense, whichever occurs earlier, unless sooner terminated by law or Executive order.

d. Federal statutes and pertinent regulations applicable to personnel in the USMC may change without notice. Such changes may affect my status as an officer candidate or commissioned officer and obligations to serve as such.

3. I certify that I have not previously failed any military aviation training program nor have I been designated as an aviator in any of the Armed Forces of the United States.

4. I certify that I have read and completely understand the meaning and content of the above. No promises, either written or oral, have been made to me in connection with my application for enrollment in the **ECP SNA** program except as specified above. I acknowledge receipt of a copy of this document.

Signature of Witnessing Officer

Signature of Applicant

Full Name and Grade of Witness

Full Name of Applicant

Date

SERVICE AGREEMENT - ENLISTED COMMISSIONING PROGRAM STUDENT NAVAL AVIATOR

ANNEX C

SERVICE AGREEMENT (1100) RESERVE ENLISTED COMMISSIONING PROGRAM GROUND

NAVMC 11875 (Rev 10-16) (EF) (Previous editions are obsolete and will not be used)

FOUO - Privacy sensitive when filled in.

PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C. 5042, Headquarters, U.S. Marine Corps; 5 U.S.C. 301, Departmental Regulations; and E.O. 9397 (SSN) as amended; and [SORN M01133-3](#).

PURPOSE(S): To certify that the applicant acknowledges and understands all expectations of him/her upon enrollment in an Officer Program in the United States Marine Corps. This service agreement binds the individual to the terms set forth in the agreement upon signature.

ROUTINE USE(S): This information will be accessed by recruiters and DON officials with a need to know in support of requests for enlistment in the U.S. Marine Corps. Information may also be released to officials and employees of other departments and agencies of the Executive Branch of government, upon request, in the performance of their official duties related to the management of quality military recruitment and the recruitment of Marine personnel.

DISCLOSURE: Voluntary; however, failure to provide the requested information may result in an inability to process the individual for enlistment.

1. In connection with my application for enrollment in the **RESERVE ENLISTED COMMISSIONING PROGRAM (RECP) GROUND** program of the United States Marine Corps Reserve (other than Active Reserve), I hereby acknowledge that:

a. Final approval of my application for enrollment in the **RECP GROUND** program as an officer candidate will be determined by the Commandant of the Marine Corps (CMC).

b. I understand that possession of the minimum required uniform is expected upon reporting to OCS although subsequent service in the Selected Marine Corps Reserve may qualify me for an initial uniform allowance of \$200.

c. Upon reporting for training to Officer Candidates School (OCS), I will be required to participate in training for a minimum of four (4) weeks of a 10-Week Commissioning Program before any voluntary request for disenrollment will be considered. A disenrollment, whether voluntary or for cause, will fully void the enlistment contract and result in my discharge from the USMCR unless I have a preexisting service obligation, in which case I would be returned to my parent unit to fulfill my obligation. I understand that should I terminate attendance at OCS prior to the completion of the requisite (4) weeks of training without the concurrence of the Commanding Officer of OCS, the Marine Corps is under no obligation to settle resultant travel expenses.

(1) If I am disenrolled from OCS and not recommended for future attendance by the Commanding Officer of OCS, I will be disenrolled from the **RECP GROUND** program.

(2) If I am disenrolled from OCS but recommended for future attendance by the Commanding Officer of OCS, I will be retained in the **RECP GROUND** program and, when eligible, have the opportunity, if I desire, to attend the next available OCS 10 week training session.

(3) If I voluntarily disenroll from OCS at any time during the course of training, I will also be disenrolled from the **RECP GROUND** program.

d. I am entitled to pay and allowances while attending OCS not less than those prescribed for pay grade E-5. I am entitled to pay and allowances for my current grade if I am an E-6 or above.

e. Upon satisfactory completion of all commissioning requirements, I understand that I must choose to either accept or decline a commission if one is tendered to me, and that deferred acceptance is not authorized. If I decline commission, I will be disenrolled from the **RECP GROUND** program and may request reenrollment to CMC, provided I remain otherwise qualified.

f. A commission in the USMCR is held at the pleasure of the President of the United States.

g. I understand that my Military Service Obligation (MSO) in the USMC will not terminate upon commissioning and does not change from my previous enlisted obligation (DODI 1304.25). Any portion of my MSO not served on active duty will be served on inactive duty as a member of the Individual Ready Reserve (IRR) or as a member of the Selected Marine Corps Reserve (SMCR).

h. A resignation of my commission submitted prior to completion of this eight (8) year period will normally be rejected and, after this period, may be accepted or rejected by the President, as the needs of the service may then require.

i. Upon successful completion of OCS and acceptance of appointment to commissioned grade, I will be assigned the primary Military Occupational Specialty (MOS) 8001 (Ground) and further be assigned to The Basic School (TBS) for commissioned officer training.

j. Upon successful completion of TBS I will be further assigned to a follow-on primary Military Occupational Specialty (MOS) school and my assignment will be based upon the SMCR unit(s) and MOS available prior to my assignment to MOS training.

2. Upon completion of MOS school, I consent to satisfactorily participate in 48-scheduled inactive duty training (IDT) periods per fiscal year during the first four (4) years of commissioned service, and to attend the first three (3) Annual Training (AT) periods. I agree not to resign a commission in the Marine Corps Reserve prior to the eighth (8) anniversary of the date of acceptance of first commission.

a. United States Code, Title 10, Chapter 39, Sections 671a and 671b currently provide as follows:

(1) 671a. Members: service extension during war. Unless terminated at an earlier date by the Secretary concerned, the period of active service of any member of an armed force is extended for the duration of any war in which the United States may be engaged and for six months thereafter.

(2) 671b. Members: service extension when Congress is not in session.

LAST NAME, FIRST AND MIDDLE INITIAL OF APPLICANT

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FOUO - Privacy sensitive when filled in.

(a) Notwithstanding any other provision of law, when the President determines that the national interest so requires, he may, if Congress is not in session, having adjourned sine die, authorize the Secretary of Defense to extend for not more than six months enlistment, appointments, periods of active duty, periods of active duty for training, periods of obligated service, or other military status, in any component of the armed forces, that expire before the thirtieth day after Congress next convenes or reconvenes.

(b) An extension under this section continues until the sixtieth day after Congress next convenes or reconvenes or until the expiration of the period of extension specified by the Secretary of Defense, whichever occurs earlier, unless sooner terminated by law or Executive order.

b. Federal statutes and pertinent regulations applicable to personnel in the USMC may change without notice. Such changes may affect my status as an officer candidate or commissioned officer and obligations to serve as such.

3. I understand that the intent of the program is to fill specific billets in an SMCR unit (not on active duty) and that any request for active duty must be approved by CMC (Reserve Affairs). Requests for augmentation to the Active Component will only be considered after the officer completes thirty-six (36) months of service in an SMCR unit. Requests for assignment to the Active Reserve (AR) program will only be considered after the officer has completed at least 36 months of commissioned service in a SMCR unit.

4. I understand that if I am on an AR contract I am not eligible to attend OCS until I am within (6) months of EAS and I will be released from my AR contract upon appointment to the **RECP GROUND** program and assignment to OCS.

5. I certify that I have read and completely understand the meaning and content of the above. No promises, either written or oral, have been made to me in connection with my application for enrollment in the **RECP GROUND** program except as specified above. I acknowledge receipt of a copy of this document. I further understand that failure to complete or abide by any of the provisions of this Service Agreement may result in being discharged or reverted back to the enlisted rank that I held upon completion of OCS.

Signature of Witnessing Officer

Signature of Applicant

Full Name and Grade of Witness

Full Name of Applicant

Date

SERVICE AGREEMENT - RESERVE ENLISTED COMMISSIONING PROGRAM GROUND**ANNEX C**

SERVICE AGREEMENT (1100)**MERITORIOUS COMMISSIONING PROGRAM RESERVE GROUND****NAVMC 11876 (Rev 10-16) (EF)** (Previous editions are obsolete and will not be used)

FOUO - Privacy sensitive when filled in.

PRIVACY ACT STATEMENT**AUTHORITY:** 10 U.S.C. 5042, Headquarters, U.S. Marine Corps; 5 U.S.C. 301, Departmental Regulations; and E.O. 9397 (SSN) as amended; and [SORN M01133-3](#).**PURPOSE(S):** To certify that the applicant acknowledges and understands all expectations of him/her upon enrollment in an Officer Program in the United States Marine Corps. This service agreement binds the individual to the terms set forth in the agreement upon signature.**ROUTINE USE(S):** This information will be accessed by recruiters and DON officials with a need to know in support of requests for enlistment in the U.S. Marine Corps. Information may also be released to officials and employees of other departments and agencies of the Executive Branch of government, upon request, in the performance of their official duties related to the management of quality military recruitment and the recruitment of Marine personnel.**DISCLOSURE:** Voluntary; however, failure to provide the requested information may result in an inability to process the individual for enlistment.

1. In connection with my application for enrollment in the **MERITORIOUS COMMISSIONING PROGRAM RESERVE (MCP-R) GROUND** program of the United States Marine Corps Reserve (USMCR) (other than Active Reserve), I hereby acknowledge that:

a. Final approval of my application for enrollment in the **MCP-R GROUND** program as an officer candidate will be determined by the Commandant of the Marine Corps (CMC).

b. I understand that possession of the minimum required uniform is expected upon reporting to OCS although subsequent service in the USMCR may qualify me for an initial uniform allowance of \$200.

c. Upon reporting for training to Officer Candidates School (OCS), I will be required to participate in training for a minimum of four (4) weeks of a 10-Week Commissioning Program before any voluntary request for disenrollment will be considered. A disenrollment, whether voluntary or for cause, will fully void the enlistment contract and result in my discharge from the USMCR unless I have a preexisting service obligation, in which case I would be returned to my parent unit to fulfill my obligation. I understand that should I terminate attendance at OCS prior to the completion of the requisite (4) weeks of training without the concurrence of the Commanding Officer of OCS, the Marine Corps is under no obligation to settle resultant travel expenses.

(1) If I am disenrolled from OCS and not recommended for future attendance by the Commanding Officer of OCS, I will be disenrolled from the **MCP-R GROUND** program.

(2) If I am disenrolled from OCS but recommended for future attendance by the Commanding Officer of OCS, I will be retained in the **MCP-R GROUND** program and, when eligible, have the opportunity, if I desire, to attend the next available OCS 10 week training session.

(3) If I voluntarily disenroll from OCS at any time during the course of training, I will also be disenrolled from the **MCP-R GROUND** program.

d. I am entitled to pay and allowances while attending OCS not less than those prescribed for pay grade E-5. I am entitled to pay and allowances for my current grade if I am an E-6 or above.

e. Upon satisfactory completion of all commissioning requirements, I understand that I must choose to either accept or decline a commission if one is tendered to me, and that deferred acceptance is not authorized. If I decline commission, I will be disenrolled from the **MCP-R GROUND** program and may request reenrollment to CMC, provided I remain otherwise qualified.

f. A commission in the USMCR is held at the pleasure of the President of the United States.

g. I understand that my Military Service Obligation (MSO) in the USMCR will not terminate upon commissioning and does not change from my previous enlisted obligation (DODI 1304.25). Any portion of my MSO not served on active duty will be served on inactive duty as a member of the Individual Ready Reserve (IRR) or as a member of the Selected Marine Corps Reserve (SMCR).

h. A resignation of my commission submitted prior to completion of this eight (8) year period will normally be rejected and, after this period, may be accepted or rejected by the President, as the needs of the service may then require.

i. Upon successful completion of OCS and acceptance of appointment to commissioned grade, I will be assigned the primary Military Occupational Specialty (MOS) 8001 (Ground) and further be assigned to The Basic School (TBS) for commissioned officer training.

j. Upon successful completion of TBS I will be further assigned to a follow-on primary Military Occupational Specialty (MOS) school and my assignment will be based upon the SMCR unit(s) and MOS available prior to my assignment to MOS training.

2. Upon completion of MOS school, I consent to satisfactorily participate in 48-scheduled inactive duty training (IDT) periods per fiscal year during the first four (4) years of commissioned service, and to attend the first three (3) Annual Training (AT) periods. I agree not to resign a commission in the Marine Corps Reserve prior to the eighth (8) anniversary of the date of acceptance of first commission.

a. United States Code, Title 10, Chapter 39, Sections 671a and 671b currently provide as follows:

(1) 671a. Members: service extension during war. Unless terminated at an earlier date by the Secretary concerned, the period of active service of any member of an armed force is extended for the duration of any war in which the United States may be engaged and for six months thereafter.

(2) 671b. Members: service extension when Congress is not in session.

LAST NAME, FIRST AND MIDDLE INITIAL OF APPLICANT

(a) Notwithstanding any other provision of law, when the President determines that the national interest so requires, he may, if Congress is not in session, having adjourned sine die, authorize the Secretary of Defense to extend for not more than six months enlistment, appointments, periods of active duty, periods of active duty for training, periods of obligated service, or other military status, in any component of the armed forces, that expire before the thirtieth day after Congress next convenes or reconvenes.

(b) An extension under this section continues until the sixtieth day after Congress next convenes or reconvenes or until the expiration of the period of extension specified by the Secretary of Defense, whichever occurs earlier, unless sooner terminated by law or Executive order.

b. Federal statutes and pertinent regulations applicable to personnel in the USMC may change without notice. Such changes may affect my status as an officer candidate or commissioned officer and obligations to serve as such.

3. I understand that the intent of the program is to fill specific billets in an SMCR unit (not on active duty) and that any request for active duty must be approved by CMC (Reserve Affairs). Requests for augmentation to the Active Component will only be considered after the officer completes thirty-six (36) months of service in an SMCR unit. Requests for assignment to the Active Reserve (AR) program will only be considered after the officer has completed at least 36 months of commissioned service.

4. I understand that if I am on an AR contract I am not eligible to attend OCS until I am within (6) months of EAS and I will be released from my AR contract upon appointment to the **MCP-R GROUND** program and assignment to OCS.

5. I certify that I have read and completely understand the meaning and content of the above. No promises, either written or oral, have been made to me in connection with my application for enrollment in the **MCP-R GROUND** program except as specified above. I acknowledge receipt of a copy of this document. I further understand that failure to complete or abide by any of the provisions of this Service Agreement may result in being discharged or reverted back to the enlisted rank that I held upon completion of OCS.

Signature of Witnessing Officer

Signature of Applicant

Full Name and Grade of Witness

Full Name of Applicant

Date

SERVICE AGREEMENT - MERITORIOUS COMMISSIONING PROGRAM RESERVE (MCP-R) GROUND

ANNEX C

ACTIVE RESERVE (AR) MARINES ONLY

End of Active (EAS) must be within six months from date of scheduled board applying unless approved by Manpower and Reserves Affairs (RAM-2).

Must provide an approved DD Form 368, Conditional Release.

If selected, AR Marines must be non-competitively augmented to the active component once identified as "Selected" on the results MARADMIN. To accomplish this, the AR Select must initiate a prior service enlisted package to Manpower Enlisted Assignments (MMEA-1) via their career planner to coordinate the augmentation. Marines must be available for world-wide assignment and qualified to re-enlist or augment.

Must obtain obligated service as outlined by current MCO 1040.43 for program applying upon augmentation to active duty.

REQUEST FOR CONDITIONAL RELEASE*(Read Privacy Act Statement and Instructions on back before completing this form.)***SECTION I - REQUEST FOR RELEASE****1. SERVICE MEMBER DATA**

a. NAME (Last, First, Middle Initial)		b. PAY GRADE	c. SSN or EDIPI	d. SERVICE COMPONENT	
e. CURRENT UNIT/ COMMAND	f. ADDRESS				
	(1) STREET	(2) CITY	(3) STATE	(4) ZIP CODE	

2. RECRUITING OFFICE ADDRESS

a. STREET	b. CITY	c. STATE	d. ZIP CODE
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3. ACKNOWLEDGEMENT OF SERVICE MEMBER

a. I request a conditional release to process for entrance into another component of the Military Service. If I am a member of the National Guard or Reserve, I understand that I must attend all scheduled training until such time as I am enlisted or appointed into another Service. I also understand that I am to keep my current commander informed of any change in my status.

b. OFFICER MEMBER ONLY. I hereby tender my resignation from the _____ (current component); request that it be accepted contingent upon actual appointment or enlistment in the _____ (requesting component), and be effective the day preceding the date of my acceptance of appointment or enlistment.

c. ENLISTED MEMBER ONLY. I understand I will be discharged from my current status effective the day preceding the date of my enlistment or appointment.

d. MEMBER SIGNATURE	e. DATE SIGNED
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4. RECRUITER REQUEST FOR CONDITIONAL RELEASE

a. Request conditional release to enlist/appoint member into the _____ (Service/Component).

b. NAME OF RECRUITER (Last, First, Middle Initial)	c. SIGNATURE	d. DATE SIGNED

SECTION II - APPROVAL/DISAPPROVAL**5. (X as applicable)**

<input type="checkbox"/>	a. APPROVED. Individual is recommended and conditional release is granted. The release is valid until _____.
<input type="checkbox"/>	b. DISAPPROVED. Release is not granted. (Explain in "Remarks.")

6. AUTHORIZING OFFICIAL

a. NAME (Last, First, Middle Initial)		b. TITLE			
c. TELEPHONE NUMBER (Include area code)	d. ADDRESS				
	(1) STREET	(2) CITY	(3) STATE	(4) ZIP CODE	
e. SIGNATURE					f. DATE SIGNED

SECTION III - NOTIFICATION OF ENLISTMENT/APPOINTMENT ACTION

7. The member was administered the oath of enlistment or appointment into _____.
THIS FORM AND A COPY OF THE OATH MUST BE RETURNED TO THE ADDRESS IN ITEM 6.d. TO EFFECT THE MEMBER'S DISCHARGE OR WITHDRAWAL OF FEDERAL RECOGNITION.

8. CERTIFYING OFFICIAL

a. NAME (Last, First, Middle Initial)		b. TITLE		c. UNIT/COMMAND	
d. TELEPHONE NUMBER (Include area code)	e. ADDRESS				
	(1) STREET	(2) CITY	(3) STATE	(4) ZIP CODE	
f. SIGNATURE					g. DATE SIGNED

SECTION IV - REMARKS**PRIVACY ACT STATEMENT**

AUTHORITY: 10 U.S.C. Sections 261, 516, 651, 716, 3013, 5013, 8013, 12104, 12105, 12106, 12107, 12208, 12213, 12214, and 12645; 32 U.S.C. Section 323; and DoD Instruction 1205.05, Transfer of Service Members Between Reserve and Regular Components of the Military Services

PRINCIPAL PURPOSE(S): To document coordination and concurrence of one Military Service for discharge and accession to another Military Service.

ROUTINE USE(S): None.

DISCLOSURE: Voluntary; however, failure to furnish all requested information may result in delay or denial of release from current Military Service.

INSTRUCTIONS**GENERAL INSTRUCTIONS.**

When this form is not computer generated, use typewriter or dark ink for all entries. Enter all dates in YYMMDD format. Use full street address, city, state and ZIP code for addresses. Use last name, first name, and middle initial format. Use short title Service/Component names: USA, ARNGUS, USAR, USN, USNR, USMC, USMCR, USAF, ANGUS, USAFR, USCG, USCGR.

SECTION I. Completed by recruiter and applicant.

Item 1. Enter applicant's name, pay grade, Social Security Number or Electronic Data Interchange Personal Identifier, current Service/Component, and current unit/command address.

Item 2. Enter recruiter's office address, if applicable.

Item 3. For item 3.b., complete the name of the gaining and losing components. Member signs and dates appropriate blocks.

Item 4. Recruiter, if applicable, completes 4.a. through 4.e. and sends this document to the address in Item 1.e.

SECTION II. Completed by applicant's unit commander or designated representative within 30 days of receipt.

Item 5. If block 5.a. is marked, enter the ending date of this conditional release. If block 5.b. is marked, indicate in Section IV, "Remarks," the reason for disapproval and return to the originator not later than the expiration date in Item 5.a.

Item 6. Enter name, title, signature and date for authorizing official. Indicate in Items 6.c. and d. the address and telephone number for returning completed Section III. Send completed Section II to the address in Item 2.

SECTION III. Completed by enlisting/appointing official within 10 days of enlistment or appointment.

Item 7. Indicate service to which applicant was enlisted/appointed.

Item 8. Completed by individual certifying enlistment/appointment action. Certifying official ensures a copy of the completed DD Form 368 and a copy of the oath are mailed to the address in Item 6.d.

SECTION IV - REMARKS.

Use as necessary. Reference each item on the form to which the remark pertains. (For example: "Item 5.b. Disapproved for the following reason:")

PROOF OF US CITIZENSHIP

Submit certified true copies of birth certificate and social security card.

Required of dual or naturalized citizen. Submit a certified true copy of one of the following:

- Foreign birth certificate translated to English (Language department at a college or university is authorized to verify)
- Form N-560/N-561 Certificate of Citizenship
- Form N-550/N-551 Certificate of Naturalization
- DS Form 1350 Certification of Birth
- FS Form 545 Certification of Birth Abroad
- FS Form 240 Consular Report of Birth Abroad
- US Passport

If applicant is foreign born of US citizen parents, applicant must provide one parent's birth certificate with FS Forms 240 or FS Form 545

Refer to the current MCRCO 1100.2 for acceptable submissions and provide the below certified statement on each verified copy:

"I have determined that this copy is a full, true, and accurate reproduction of the original after personally comparing the copy and original or observing the copying process. No modifications or alterations have been made to either the original document or this copy."



UNITED STATES MARINE CORPS
UNIT LETTERHEAD
STREET
CITY ST 12345-1234

5500
Code
Date

From: Security Officer, (Unit)
To: Commanding General, Marine Corps Recruiting Command (ON/E)
Subj: SECURITY CLEARANCE VERIFICATION LETTER
Ref: (a) SECNAVINST 5510.30C

1. The following has been extracted from official records:

a. Name: Marine Full Name/EDIPI/PMOS

b. Clearance: Investigation – PRSC (YYYYMMDD) OPM
NACLC (YYYYMMDD) OPM
ENAC (YYYYMMDD) OPM

Eligibility – SECRET (YYYYMMDD) DoNCAF

U.S. Access – Secret

2. Add sentence here if eligibility has expired, new investigation has been opened, and provide a date investigation was opened and accepted or enrolled in the Continuous Evaluation Program (CEP) and date enrolled. (Note: SECRET level lasts for 10 years and TOP SECRET lasts for 5 years in accordance with the reference).

3. Point of contact for this matter is (Rank Full Name), defense system network or commercial telephone numbers and electronic mail address.

SECURITY OFFICER SIGNATURE

DEPENDENT STATEMENT

STATEMENT ON FMF SERVICE (APPLICANT)

“I understand that I _____ am eligible for worldwide Fleet Marine Force (FMF) service without my dependent (s) accompanying me”

STATEMENT ON FMF SERVICE (SPOUSE)

“I _____ understand that _____, is eligible for worldwide Fleet Marine Force (FMF) service without his / her dependent (s) accompanying him/her.”

Applicant's Signature/Date

Spouse Signature/Date

Marine Rep Signature/Date

NAME CHANGE INFORMATION

Required only to show name change if different from birth certificate or proof of citizenship:

- Marriage Certificate/Divorce Decree (as applicable)
- Other official court documents (as applicable)

STATEMENTS OF UNDERSTANDING

Required statements of understanding for all applicants:

- Restrictions on Personal Conduct in the Armed Forces
- Marine Corps Policy Concerning Use of Drugs
- Marine Corps Policy Concerning Fraternization
- NAVMC 11494 Servicemembers Civil Relief Act Advice
- NAVMC 11000 Data Required by the Privacy Act of 1974
- MCRC SOU Marine Corps Uniform Regulations for Standards of Personal Appearance
- Marine Corps Policy Concerning Military Occupational Specialties to All Officer Applicants

Ensure all signatures, dates, correct programs, and PII is filled out. Officers in charge of applicants sign as Officer Selection Officer on the Restrictions SOU, the witness on the NAVMC 11494, and all other officer signature blocks. The MEPS LNCO blocks can remain blank on the Personal Appearance SOU.

RESTRICTIONS ON PERSONAL CONDUCT IN THE ARMED FORCES

(Revised)

1. Military life is fundamentally different than civilian life. As a member of the Armed Forces, you represent the military establishment and occupy a unique position in society. This special status brings with it the responsibility to uphold and maintain the dignity and high standards of the Armed Forces, and as a service member you are subject to military laws and regulations, including the Uniform Code of Military Justice, at all times and in all places, both on and off base, from the time you enter the Armed Forces until discharged or otherwise separated from the Armed Forces.

2. You must also be ready at all times for world-wide deployment. This fact carries with it the requirement for military units and their members to possess high standards of morale, good order and discipline, and cohesion. As a result, military laws, regulations, customs and traditions impose certain restrictions on your personal behavior that may be different from civilian life. Members of the Armed Forces may be involuntarily separated before their enlistment or term of service ends for various reasons, including, but not limited to, the following:

- a. Commission of a military or civilian criminal offense;
- b. Unlawful drug involvement;
- c. Intentional misrepresentation or omission of material fact in obtaining an appointment in the Armed Forces;
- d. A pattern of discreditable involvement with military or civilian authorities;
- e. Illegal discrimination based on race, creed, color, sex, religion, or national origin;
- f. Advocating the use of force or violence against any Federal, State, or local Government in contravention of the law;
- g. Conduct that can disrupt or degrade the mission or effectiveness of your unit;
- h. Conduct that would bring discredit on the Armed Forces in the view of the civilian community;

i. Inability to perform your duties satisfactorily or being unavailable for world-wide assignment or deployment because of parental responsibilities; or

j. Failure to comply with the Marine Corps' weight control and body composition standards.

I have read and understand the contents of this document.

Applicant

Officer In Charge

Signature/Date

Signature/Date

STATEMENT OF UNDERSTANDING

MARINE CORPS POLICY CONCERNING USE OF DRUGS

1. Purpose. The purpose of this document is to make sure that you completely understand the Marine Corps policy on the illegal use of drugs.

2. Policy. The illegal distribution, possession or use of drugs is not tolerated in the United States Marine Corps. Furthermore, each instance of illegal drug use by a Marine makes that Marine unfit for duty and a risk to the safety of fellow Marines. In the Corps, every Marine has a responsibility for the lives of fellow Marines. It is your responsibility to use all your influence over fellow Marines to help avoid involvement with illegal drugs. As a Marine, you are expected to be dedicated to the highest standards of personal conduct and honor.

3. Certification. I certify that I completely understand the Marine Corps policy on the illegal use of drugs. I understand I will be screened for alcohol and given urinalysis tests for drugs during my initial physical, and given a urinalysis test for drugs within 24 hours of my arrival at Officer Candidates School. I understand that if I test positive for drugs or alcohol at any time, I will be disqualified for enlistment and appointment. I understand that if I test positive on the urinalysis at Officer Candidates School or The Basic School that I will be subject to an administrative discharge from the Marine Corps or even to courts-martial. I also understand that once I enlist into an officer candidate program, any illegal use of drugs will adversely affect my ability to commence training at Officer Candidates School and The Basic School if commissioned.

(Applicant's Signature)

(Date)

(Applicant's Printed Name)

(Last 4 Social Security Number)

4. Marine Officer Verification. I certify that I have completely explained the Marine Corps policy on the illegal use of drugs to the above named applicant and advised him/her to be thoroughly honest in completing the Drug Abuse screening form.

(Marine Officer Signature)

(Date)

(Marine Officer Printed Name)

STATEMENT OF UNDERSTANDING

MARINE CORPS POLICY CONCERNING FRATERNIZATION

1. **Purpose.** The purpose of this document is to insure that you understand the Marine Corps policy on fraternization.
2. **Policy.** Personal relationships between officer and enlisted members that are unduly familiar and that do not respect differences in grade or rank are prohibited. Such relationships are prejudicial to good order and discipline and violate long-standing traditions of naval service. Fraternization may be charged as an offense under the Uniform Code of Military Justice. The only exceptions are familial relationships, such as marriages that occur prior to the date of commissioning and relationships between parents and children or between siblings.
3. **Certification.** I certify that I have read the Marine Corps policy on fraternization. I understand that violation of this policy can result in adverse action to include, but not limited to, disenrollment from the Officer Candidates School, and, once commissioned, processing for administrative discharge, and courts-martial.

Applicant' Signature

Date

Applicant' Printed Name

4. **Marine Officer Verification.** I certify that I have completely explained the Marine Corps policy on fraternization to the above named applicant.

Officer Signature

Date

NAME: (LAST, FIRST, MIDDLE)

LAST 4 SSN

PROGRAM

SERVICEMEMBERS CIVIL RELIEF ACT ADVICE AND STATEMENT OF UNDERSTANDING

1. I, _____, by my signature at the bottom of this page, am hereby informed of the rights I gain as a servicemember under the Servicemembers Civil Relief Act of 2003 (50 U.S.C. App §§ 501-597b) (the "SCRA"). I am also hereby informed, as required by 50 U.S.C. App § 515, regarding how I may learn more about the extent of these rights and how to exercise those rights.

2. GENERAL INFORMATION:

The Servicemembers Civil Relief Act of 2003 is a Federal law that replaced the Soldiers and Sailors Civil Relief Act. It provides many new legal rights to you and, in some cases, your dependents. For more information on the SCRA and how to exercise your rights, you should (a) consult with a military Legal Assistance attorney provided to you (and your spouse) free of charge at most military installations, and (b) read the SCRA information found at http://www.marines.mil/unit/judgeadvocate/Pages/JAL/JAL_home.aspx or <https://wwwa.nko.navy.mil/portal/home> [enter "SCRA" in the search box].

3. WHO IS COVERED:

Members of the Air Force, Army, Coast Guard, Marine Corps, and Navy on active duty (including Reserves ordered to active duty), Public Health Service and National Oceanic and Atmospheric Administration Officers, and National Guard members called to Federal active service in excess of thirty (30) days. U.S. citizens serving with a U.S. allied force in the prosecution of a war or military action are likewise covered. Dependents (which generally includes spouse, children, and those you provide more than one-half of their support) of these people are covered under some sections of the SCRA.

4. RIGHTS. A useful, but not all inclusive summary of the SCRA's many rights follows:

a. **Exercising Your Rights:** you may exercise your SCRA rights yourself, or you may have (i) an attorney, or (ii) another person to whom you have delegated (by Power of Attorney) the ability to exercise your SCRA rights for you;

b. **Retaliation Protection:** creditors, landlords, insurers, and others may not take adverse action (for example, denying credit, issuing adverse credit reports) against you *solely* because you exercise your SCRA rights;

c. **Terminating Leases and Cell Phone Contracts:** you may be able to terminate a lease for your home, apartment, business, or motor vehicle. You may also be able to terminate a cell phone contract that you signed prior to active duty, or during active duty when you receive deployment or PCS orders;

d. **6% Interest Rate Cap on Debts:** some pre-service debts (but no debts incurred during active duty) may be limited to a six percent (6%) interest rate, if you follow the SCRA's procedures. Examples include mortgages, consumer debts, and federally insured student loans;

e. **Eviction Protection:** you or your dependents may not be evicted from a dwelling with rent not greater than \$2,975.54 (as of Jan 2011) without a court order; if the landlord obtains a court order, a court may delay the eviction for 90 days;

f. **Installment Contracts for Property:** pre-service installment contracts for real or personal property (including a motor vehicle) where you have made deposits or payments may not be terminated or the property repossessed for breach or non-payment *unless* a court issues a court order;

g. **Stays/Delays in Proceedings:** if you cannot appear at court or an administrative proceeding concerning a civil matter because of your military service, you may request an automatic 90-day delay in any judicial (court) or administrative hearing, by following the SCRA's procedures; you may also request additional stays if you cannot appear due to your military service; this does not apply to criminal proceedings.

h. **Default Judgments:** if you do not respond to a lawsuit against you, you may be ruled against in a "default judgment"; before a judgment is entered, the opposing party must inform the court whether you are in the military, and if so, the court must appoint an attorney to represent your interests; if default judgment is entered against you, you may attempt to *reopen* that judgment no later than 90 days after you leave the military service;

i. **Statutes of Limitations:** except with regard to IRS (federal tax) laws, your period of military service is *excluded* from calculating statutes of limitations (times during which court actions or administrative proceedings may be brought *by* or *against* you or your heirs, executors, administrators, or assigns);

j. **Mortgages and Storage Liens:** actions to enforce pre-service mortgages or storage liens generally must be stayed or adjusted during your military service, if you appropriately so request from the court; sales, foreclosures, or seizures without court order will be invalid unless you have executed a valid SCRA waiver;

k. **Taxes:** generally (1) your and your spouse's state of legal residence and domicile is unaffected by your military service within other states; (2) your military compensation is not "income" for tax purposes of states where you are not a legal resident or domiciliary; (3) states where you are not a legal resident or domiciliary cannot use your military income to increase your spouse's tax liability; (4) upon your request, the federal and state government tax authorities *may* grant deferrals of income taxes due before or during military service, but cannot add interest or penalties if they grant your deferral request; (5) your property cannot be sold or foreclosed to satisfy your unpaid taxes except by court order; (6) the amount of taxes (other than income tax) or assessments due and unpaid will bear an interest rate of 6% per year and courts *can* stay proceedings to enforce tax collection, assessment, or tax-related property sales.

l. **Professional, Health, Life Insurance:** (a) certain types of professional liability insurance may be suspended during active duty upon written request, and reinstated upon release from active duty, with restrictions on how premiums may be increased during your active duty service; (b) health insurance active the day before your service commences, terminated during active duty, generally may be reinstated within 120 days from your release from active duty; (c) for life insurance policies in force 180 days or more before your service, coverage may not be decreased, nor premiums increased, and you may request the Secretary of Veteran Affairs to protect policies up to the greater of \$250,000 or an amount equal to the SGLI maximum limit from termination due to nonpayments of premiums, interest, or indebtedness on a premium, during your military service and 2 years thereafter.

m. **Small Owner business Protection:** if you are personally liable for obligations of your business or trade, your non-business assets and military pay are, in general, sheltered from creditors with respect to those obligations during your military service;

n. **Voting Rights:** your and your spouse's residency for Federal, State, or local voting purposes is unaffected by your absence from your voting state due to your military service;

o. **Other Relief:** you may apply to courts for "general relief" on other matters no later than 180 days from your release from military service.

5. WAIVER OF SCRA RIGHTS. You may waive any of the rights and protections provided by the SCRA. Waivers of many rights and protections must be in writing in an instrument separate from the obligation or liability to which it applies. You should consult with a Legal Assistance attorney before waiving your rights.

6. EXERCISING YOUR RIGHTS: There are many time limitations and procedural requirements for you to exercise your SCRA rights. If you have any questions about your rights or anticipate needing to exercise your SCRA rights, immediately seek the advice of free military Legal Assistance attorneys.

7. SIGNATURE BELOW: Signing this document indicates that you have reviewed this document completely and understand its contents.

16a. SIGNATURE		DATE
17. WITNESS AND ACCEPTANCE. The execution of this document was witnessed by me who accepted it on behalf of the United States Department of Defense as fulfilling the notice requirement of the SCRA of 2003.	a. SIGNATURE	DATE

DATA REQUIRED BY THE PRIVACY ACT OF 1974

(5 U. S. C. 552A)

PART A GENERAL

The Marine Corps uses a variety of forms in administering matters related to the individual Marine. Forms are necessary for enlistment and reenlistment, evaluating performance, applying for training and assignments, granting leave, disciplinary action, administering pay, and other purposes. In some instances, these forms involve the collection of personal information from the individual Marine. Information such as home address and telephone number, names and other information on dependents, preference for duty, address on leave, and the individual's Social Security Number are illustrative of the information asked for on forms.

The Privacy Act of 1974 requires that you be informed of the authority, purposes, uses, and effects of not providing information when it is requested from you. In order to eliminate the need for issuing an individual statement each time information is requested from you about matters such as those described, this statement serves as a one-time Privacy Act Statement which is intended to satisfy the requirements of the Privacy Act when forms related to your personnel and pay records are used. If you desire more information about a specific form when it is used, your commanding officer will provide such information upon request.

Pursuant to the Computer Matching and Privacy Protection Act of 1988 (P.L. 100-503), information furnished may or will be subject to verification by computer matching (internally or with another specific agency). The match may be necessary to verify accuracy of data, and to uncover waste, fraud, or abuse in Federal Programs.

PART B - INFORMATION TO BE FURNISHED TO INDIVIDUAL**1. AUTHORITY**

Title 5, U.S. Code, Section 301, is the basic authority for maintaining personnel and pay records. Use of Social Security Number as a means of personal identification is authorized by Executive Order 9397 of 23 November 1943.

2. PRINCIPAL PURPOSES

The basic purposes of personnel and pay records are to enable officials and employees of the Marine Corps to efficiently manage personnel resources; to administer pay and allowances; to screen and select individuals for promotion; to provide educational and training programs; to administer appeals, grievances, discipline, litigation, investigations, and adjudication of claims; to administer benefits and entitlements; and to manage retirement and veterans affairs programs. Further information about the purposes and uses of information being requested from can be obtained by consulting the applicable description for system such as the following:

<u>SYSTEM DESCRIPTION</u>	<u>SYSTEM NUMBER</u>
Marine Corps Military Personnel Records System	MMN 00006
Bond and Allotment System	MFD 00004
Joint Uniform Military Pay System/Manpower Management System	MFD 00003

3. ROUTINE USES

Information included in personnel and pay records is used by officials and employees of the Marine Corps in the execution of their official duties. The information is also used under certain conditions by officials and employees elsewhere in the Department of Defense; by other Federal agencies such as the General Accounting Office; Office of Personnel Management; Veterans Administration; the Federal Bureau of Investigation and other Federal, state, and local law enforcement authorities; and the General Services Administration. Information is also furnished to Congressional sources. Your Social Security Number is used as a means of personal identification.

4. MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL OF NOT PROVIDING INFORMATION

Disclosure of information required on forms related to personnel and pay records is mandatory. An individual may, at his or her option, elect not to apply for benefits and services to which entitled (leave, registration of allotments, etc.) but once the individual has made the decision to apply for such benefits the disclosure of information on related forms becomes a mandatory action. Failure to provide requested information could have the effect of denying certain benefits and would hamper the efficient management of an individual's career while in the Marine Corps. Disclosure of your Social Security Number is mandatory.

PART C - STATEMENT OF UNDERSTANDING BY THE INDIVIDUAL

I have read and understand this statement, I understand that I may have the opportunity to review published systems notices and current Marine Corps directives which pertain to forms which I am asked to complete.

Date_____
Signature of the Individual_____
Social Security No.**PRIVACY ACT STATEMENT FOR MARINE CORPS PERSONNEL AND PAY RECORDS**

NAVMC 11000 (REV. 5-90) (EF) SN: 0109-LF-064-8800

(5211)

(File Original in OQR or SRB; Provide Copy to Individual)

MARINE CORPS RECRUITING COMMAND
STATEMENT OF UNDERSTANDING
MARINE CORPS UNIFORM REGULATIONS FOR STANDARDS OF PERSONAL APPEARANCE

POLICY

In accordance with insert MARADMIN, Marines will present the best possible image at all times and continue to set the example in military presence. Marine Corps Uniform Regulations strictly **prohibit** mutilation of the body or any parts in any manner, and attaching, affixing or displaying objects, articles, jewelry or ornamentation to, through or under the skin, tongue or any other body part. Tattoos on the head (including in or around the mouth), neck area, hands, fingers, and any tattoos on other parts of the body, that are prejudicial to good order and discipline, gang or extremist group related, or bring discredit to the Marine Corps are also **prohibited**.

UNDERSTANDING

I understand that mutilation of the body or any body parts in any manner is **prohibited** and that attaching, affixing or displaying objects, articles, jewelry or ornamentation to, through or under the skin, tongue or any other body part is **prohibited** with the exception of females wearing earrings consistent with the Marine Corps regulations.

I understand that tattoos located anywhere on the body that are prejudicial to good order and discipline, or are of a nature to bring discredit upon the Marine Corps, are **prohibited** (Examples include, but are not limited to, tattoos that are drug-related, gang-related, extremist, obscene or indecent, sexist, or racist).

I understand that tattoos on the head or neck, including in or around the mouth area, are **prohibited** and that tattoos on the chest or back must be covered by wearing a properly fitting crew-neck undershirt with no portion of the tattoo showing.

I understand that tattoos on the hands, and fingers are **prohibited**, with the exception of a single band tattoo of no more than 3/8 of an inch in width on one finger of each hand.

I understand that any tattoo only visible with the use of ultra-violet light must still adhere to the same requirements, limitations, and prohibitions applicable to visible tattoos.

I understand that I will be screened for tattoos, brands and body ornamentations, and must complete the Marine Corps Tattoo Screening Form. I further understand I will be re-screened prior to shipping to recruit training or my request for appointment for any additional tattoos, brands and body ornamentations received while in the Delayed Enlistment Program or Officer commissioning process.

Certification

I certify that I completely understand the Marine Corps policy on the tattoos, brands, and ornamentations and I have reviewed the tattoo policy graphics on page three of this statement of understanding.

Applicant's Printed Name	Applicant's Signature	Date
Certifying Officer / Recruiter's Printed Name	Certifying Officer / Recruiter's Signature	Date
MEPS LNCO Printed Name (Non-prior service enlisted only)	MEPS LNCO Signature (Non-prior service enlisted only)	Date

**Subject: MARINE CORPS POLICY CONCERNING MILITARY OCCUPATIONAL
SPECIALTIES (MOS) TO ALL OFFICER APPLICANTS**

1. Purpose. The purpose of this document is to provide notification of the Marine Corps policy on the integration of women into all military occupational specialties (MOS).

2. Policy. In January 2013 the Department of Defense eliminated the "1994" Direct Ground Combat Definition and Assignment Rule, which effectively removed the remaining barrier to the integration of women into all military occupational specialties and career fields within the U.S. military. On 3 December 2015, the Secretary of Defense announced that no exceptions to full integration of women into all MOSs were warranted. On 2 January 2016, in a deliberate, measured and responsible process, the Marine Corps will commence an implementation plan to expand active and reserve ground combat arms opportunities for women in the service.

3. Certification. I certify that I have read the Marine Corps' policy on integrating women into all MOSs. I fully understand that I have the opportunity to qualify for service in any MOS.

Applicants Signature

Date

Applicants Printed Name

X X X - X X - _ _ _ _
Applicants Last 4 of SSN

APTITUDE TEST SCORES

Qualifying Test Scores:

- 74 AFQT on the Armed Services Vocational Aptitude Battery (ASVAB)
- 1000 (Math and Critical Reading Only) on the Scholastic Aptitude Test (SAT) - Must submit official SAT Score Report
- 22 (Composite) or 45 (Combines Math and English) on the American College Test (ACT) – Must submit official ACT Score Report

Must have one of the three qualifying scores. All scores must come from the single, most recent test. Scores from two different test dates cannot be combined to arrive at a qualifying score. Refer to the current MCO 1040.43

ECP applicants applying for aviation must have the following minimum scores from the Aviation Selection Test Battery Series E (ASTB-E):

- 4 Academic Qualification Rating (AQR)
- 6 Pilot Flight Aptitude Rating (PFAR)

COLLEGE TRANSCRIPTS/PROOF OF DEGREE

MECEP:

- Unofficial transcripts must show:
 - School name
 - School address with state
 - Cumulative grade point average
 - Number of credits earned
 - Scan entire front and back
- Requirements for credits:
 - 3 credits of entry level math or science (must be a natural or physical science, not a social or behavioral science)
 - 3 credits of entry level English
 - 6 credits of any other college course
 - Must have earned a minimum of 12 credits
 - Marines who have earned 90 or more credit hours or have complete their junior year will not be boarded and are recommended to apply for ECP once they have completed their baccalaureate level degree from an accredited college or university

ECP/RECP/MCP-R:

- Unofficial transcripts must show same as above, plus:
 - Full confer date for baccalaureate level degree
 - Full confer date for associates or minimum 75 credits (MCP-R only)
 - May submit a copy of diploma in addition to the above

Transcript requests should be submitted directly to all colleges or university attended. Any cost associated with gathering transcripts is the responsibility of the applicant.

REQUIRED FORMS AND DOCUMENTS

ON/E Application and Program Information Sheet with Privacy Act Statement:

- Only submit page 1 and 2 of this form. Do not submit instructions
- Must provide full SSN on this form
- Ensure all fields are completely filled out, especially the following:
 - Home of Record (must match DD Form 4) and include county
 - Unit address
 - Cumulative GPA (must match transcripts)
 - Grad Date (ECP/RECP only – Full confer date)
 - Current PFT/CFT and Date (must match MCTFS TBTR) - unless NAVMC submitted
 - HT/WT
 - Test Scores
- The following should remain blank:
 - DTE OF PROGRAM ENTRY
 - PROJ/COMP OCS
 - PROJ COMM
- Ensure you mark "YES" for **all** prior and current violations and drug use even if waived prior to joining the Marine Corps and provide detailed explanation on one of the below forms: (Previously waived is not an acceptable explanation)
 - Addendum to Application for Statement – Ensure dated and signed
 - Drug Statement Form – Ensure dated, signed, and correct program annotated
 - Non-Traffic Arrest Form – Ensure dated, signed, and correct program annotated
 - Minor Traffic Form - Ensure dated, signed, and correct program annotated
 - All forms are required, if it is not applicable, annotate as such, sign, date, and submit with package

The below pertains to the Minor Traffic Form and Non-Traffic Arrest Form:

- Refer to instructions on form to correctly fill out the Minor Traffic Form
- **All** law and traffic violations to include violations prior to enlistment to the Marine Corps must be annotated on one of the above forms regardless of when they occurred

- Must provide supporting documentation or signed DD Form 369 on all alcohol and assault violations regardless of when they occurred
- All violations within 5 years of board convening date must provide supporting documents or a signed DD Form 369 (Police Records Check) in the jurisdiction where the offense(s) took place. In the event the jurisdiction does not sign the DD Form 369, they must provide a signed statement on their letterhead. Applicants can contact recruiters in the jurisdiction of violations to ask if they will assist with police record checks.

MCRC Tattoo Screening Form:

- Ensure Parts I, II, III, and IV are completed and signed and dated where required
- If yes to tattoos, ensure body locations are documented in Part II
- Certifying Officers must ensure all parts I - III are answered completely and honestly
- MCRC will review all tattoos; however, Certifying Officers can add comments in Part IV

Drug Statement, Traffic Offense, Non Traffic Arrest, and Tattoo Screening Forms:

- All from must be filled out and turned in with the application
- If not applicable, annotate N/A, sign and have certified by an officer
- Certifying Officers must confirm the information is correct

APPENDIX G

MCRC REGULAR OFFICER (ON/E) APPLICATION AND PROGRAM INFORMATION SHEET

LAST NAME, FIRST, MI			FULL SSN		RANK/PMOS		EAS(YMMDD)		MARITAL STATUS		RACE						
SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE			DOB(YMMDD)			RELIGION			CITIZENSHIP								
HOME OF RECORD ADDRESS: (INCLUDE COUNTY)						EMAIL			DTE OF PRGM ENTRY (board/msg date)								
						PHONE											
UNIT ADDRESS			PROGRAM			<input type="checkbox"/> NROTC NAVY			<input type="checkbox"/> CIVILIAN			<input type="checkbox"/> NAVAL ACADEMY					
			(CHECK			<input type="checkbox"/> NROTC MARINE			<input type="checkbox"/> ECP/RECP			<input type="checkbox"/> AIR FORCE ACAD					
			ALL THAT			<input type="checkbox"/> COLLEGE PROGRAM			<input type="checkbox"/> MECEP			<input type="checkbox"/> WEST POINT					
			APPLY)			<input type="checkbox"/> SCHOLARSHIP			<input type="checkbox"/> MCP-R			<input type="checkbox"/> USMMA					
ACAD MAJOR/EDUC LEVEL			CUMGPA		SEM GPA		GRAD DATE		PROJ COMM DATE		COLLEGE						
PFT SCORE		PU		CRUNCHES		RUN		HT(INCH)/WT		BF%		PFT DATE		CFT SCORE		CFT DATE	
SAT MATH			CR			TOTAL			COMPOSITE ACT			AFQT		ASTB		PROJ/COMP OCS	
EXTRACURRICULAR ACTIVITIES/BILLETS HELD																	
RELATIVES WHO SERVED OR ARE SERVING IN THE ARMED FORCES																	
RELATIONSHIP				RANK		BRANCH OF SERVICE				STATUS							
*IF YOU ANSWER "YES" TO ANY OF FOLLOWING QUESTIONS, ATTACH A HAND-WRITTEN STATEMENT ON THE ADDENDUM PAGE OR USE THE MINOR TRAFFIC PAGE, NON-TRAFFIC ARREST FORM OR DRUG FORM (WHERE APPLICABLE) EXPLAINING THE SPECIFIC CIRCUMSTANCES (WHEN, WHERE, WHY, HOW MANY, ETC. AND CURRENT STATUS)												YES		NO			
1. Have you ever applied or been a member of any other officer program (PLC, OCC, NROTC, ECP , MECEP , MCP-R, RECP, or Service Academy)?																	
2. Have you ever failed any military flight training program?																	
3. Have you previously applied for any other branch of the Armed Forces? Were you rejected?																	
4. Have you ever claimed or been granted a pension, disability allowance, compensation, or retired pay from the Federal Government?																	
5. Are you a "sole survivor"? (All other siblings and or parents have died/captured/MIA in combat)																	
6. Have you ever been cited, arrested, convicted or sentenced by a law enforcement activity, regardless of final adjudication? (If yes, provide the minor traffic page and/or non-traffic arrest form with supporting documentation or police record check.)																	
7. Have you ever received a suspended sentence by a court?																	
8. Have you ever been in jail, reform school, or penitentiary?																	
9. Are you now, or have you ever been on parole, probation, suspension, or other forms of restraint (from law enforcement)?																	
10. Are you a conscientious objector?																	
11. Have you ever been psychologically or physically dependent upon any drugs or alcohol?																	
12. Have you ever used or been a trafficker of non-prescribed or illegal drugs? (If yes, provide drug statement form with a detailed statement.)																	
13. Do you qualify for permanent restrictions assignments? (Family member, kin, 100% disability while serving in hostile fire area.)																	
14. Do you or have you ever had any tattoos, body piercings, ornamentation, or brandings and body mutilations? (Provide description, date received, location, and color photos of all tattoo(s) and/or brandings along with tattoo screening form and tattoo statement of understanding.)																	
15. If prior enlisted, do you have any previous approved enlisted waivers?																	
I certify that the information contained in the application is true, complete and correct to the best of my knowledge and belief. I understand that knowing and willful false statements on this form can be punished by a fine or imprisonment or both. (See U.S. Code Title 18, Section 1001). Member's Signature _____										Commissioned Officer's Signature: _____							
Date _____										Date _____							

(REV Feb 2021; All Previous Revisions are Obsolete)

(Instructions on Page 3)

Privacy Act Statement

AUTHORITY: Title 10 U.S. Code §§ 531 and 591

PURPOSE: To determine the eligibility of applicants to enlisted to officer commissioning programs. Disclosure of Social Security Account Number is mandatory and is used to further identify the individual providing the information.

ROUTINE USES: The information is used for the purpose set forth above and may be:

- Forwarded to the respective programs officer selection boards;
- Reviewed by multiple entities in the service member's chain of command.

MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION:

For Military Personnel: Disclosure of personal information is mandatory and failure to do so disqualifies the applicant's application.

ACKNOWLEDGMENT:

I understand the provisions of the Privacy Act of 1974 as related to me through the foregoing statement.

Signature: _____

Date: _____

INSTRUCTIONS ON FILLING OUT THE MCRC REGULAR OFFICER (ON/E) APPLICATION AND PROGRAM INFORMATION SHEET (MUST BE TYPED)

NAME	As it appears on birth certificate (married name for females)
SSN	Full SSN as it appears on Social Security Card (do not use EDIPI/DOD ID #)
RANK/PMOS	For MIDN: 1/C, 2/C, 3/C or 4/C. For Marines: Rank and Primary MOS
EAS	End of Active Service: Marines only.
MARITAL STATUS	Single, Married, Annulled, Divorced, Separated, Widowed
RACE	See Race Codes on MCRC ON/E Website
SEX	MALE or FEMALE
DOB	Date of Birth as it shows on birth certificate in YYMMDD format.
RELIGION	See Religion Codes on MCRC ON/E Website or NONE
CITIZENSHIP	US BORN, NATURALIZED, FOREIGN BORN TO US PARENTS, ETC., FOREIGN NATIONAL
HOME OF RECORD	Address as it is shown on enlistment contract. MUST INCLUDE COUNTY
EMAIL	Personal email address, cannot be a .edu address
PHONE	Personal phone number to include area code
DATE OF PROGRAM ENTRY	Leave Blank. MCRC personnel will fill out for application purposes. MOIs will fill out prior to the Request for Appointment
UNIT ADDRESS	NROTCU/parent command mailing address for official correspondence
PROGRAM	Current status or program applying for as applicable
ACAD MAJOR/EDU LEVEL	Major in current studies or degree and/or what was the highest level of education completed
CUMGPA	Cumulative grade point average (GPA) for completed college classes. Include calculated GPA if more than one college has been attended
SEM GPA	Last completed semester/quarter GPA
GRAD DATE	Date of degree completion in YYMMDD format
PROJ COMM DATE	Leave Blank
COLLEGE	Name of school attended if degree completed (MECEP board applicants leave blank)

APPENDIX G

PFT SCORE	Marine Corps Physical Fitness Test total points
PULL UPS/ PUSH UPS	Pull ups/ Push ups (total)
CRUNCHES/PLANKS	Total number or time
RUN	3 mile run time in minutes and seconds (18:00)
HT(INCH)/WT	Height in inches (71)/weight in pounds (180)
BF%	Body fat percentage if over height/weight standards per MCO
PFT DATE	Date of most current PFT in YYMMDD format
CFT SCORE	Marine Corps Combat Fitness Test score if taken
CFT DATE	Most Current date CFT was taken in YYMMDD format
SAT (MATH/CR) TOTAL	Most recent Scholastic Aptitude Test scores (Combined Math and Critical Reading totals only), scores must be from same test (if taken)
COMPOSITE ACT	Most recent test composite score only (if taken)
AFQT	Armed Forces Qualification Test portion of the Armed Services Vocational Aptitude Battery test Score (if taken)
ASTB	Aviation Selection Test Battery scores (if taken)
PROJ/COMP OCS	Leave Blank
EXTRACURRICULAR ACTIVITIES/BILLETS HELD (If applicable)	
RELATIVES WHO SERVED OR ARE SERVING IN THE ARMED FORCES (If applicable)	
QUESTIONS 1 to 15 - All "YES" answers must have a detailed statement or use the minor traffic page, non-traffic arrest form or drug form (where applicable) explaining the specific circumstances (when, where, why, how many, etc and current status (Marines: "located in SRB or previously waived upon enlistment" is not an acceptable answer as additional review is required)	
MEMBER'S SIGNATURE	Applicant or participant signature certifying the information
COMMISSIONED OFFICER'S SIGNATURE	Authorized officer certifying that form is complete and all requirements were fulfilled.
PRIVACY ACT STATEMENT	Applicant or participant signature and dated

WHEN COMPLETED (SIGNATURES, AND AMPLIFYING INFORMATION), PRINT PAGES 1-2 AND SUBMIT (AS APPROPRIATE); DO NOT SUBMIT INSTRUCTIONS

ADDENDUM PAGE
MCRC APPLICATION/INFO SHEET FOR REGULAR OFFICER PROGRAMS (ON/E)

Applicant's Statement to explain all "YES" answers:

Applicant Signature

DATE: _____

Officer Signature

DATE: _____

MARINE CORPS RECRUITING COMMAND TATTOO SCREENING FORM		
NAME (Last, First, MI)	LAST 4 SSN	DATE
PART I. PURPOSE.		
<i>The purpose of this form is to ensure that you tell us the full extent of your tattoos, brands and/or body ornamentation. Refusal to complete the form will result in termination of your enlistment processing.</i>		
1. Does the applicant <u>currently have, or ever had</u> any tattoos, brands, body markings, or body ornamentation, or has the applicant <u>ever had</u> a tattoo, brand or body ornamentation <u>removed, concealed, covered or altered</u> ?	YES	NO*
<i>*NOTE: If the answer to question 1 is NO; move on to the Part II Certification block of this form. Questions 2-8 are not required. If the answer to question 1 is YES; move on to question 2. The MEPS Liaison may endorse the TSF as the reviewing officer when the applicant has NO tattoos or body markings.</i>		
2. Does applicant have body markings of any type that are exposed or partially exposed above the standard, well fitted PT shirt collar or below the wrist bone?	YES	NO*
<i>*NOTE: If the answer to question 2 is NO; move on to questions 4-7. If the answer to question 2 is YES; complete questions 3-7.</i>		
3. Are any of the tattoos, brands or markings:	YES	NO
a. on head or neck (above collarbone in front, above seventh [C7] cervical [last] vertebrae in back or otherwise visible in open collar short-sleeve khaki shirt with white undershirt or inside the mouth?		
b. On hands or fingers (with exception of a single band tattoo more than 3/8 of an inch in width on one finger of each hand)?		
4. Do any of the tattoos, markings etc., depict nudity, are they racist, eccentric, offensive in nature, or express an association with conduct or substances prohibited by the Marine Corps Drug policy, the UCMJ, to include tattoos associated with illegal drugs, drug usage or paraphernalia?	YES	NO

NAME (Last, First, MI)	LAST 4 SSN	DATE
5. Do any of the tattoos, brands or body ornamentation represent a gang membership or extremist group, advocate racial, ethnic, or religious discrimination, obscene, prejudicial to good order and discipline/morale or of a nature to discredit to the Marine Corps?	YES	NO
6. Are any of the tattoos a result of a specific activity? (i.e. activity for membership initiation, or as the result of any violation of law(s)?	YES	NO
7. Are there any body markings, ornamentation or mutilation (i.e. Tongue Splitting, etc.), Ornamental Body Piercing(s), Holes in Ear Lobes (large enough for light to pass through opening), or Ornamental Implantations, (silicone implants on face, horns on the forehead, etc.).	YES*	NO
*NOTE: Remind applicants or officer candidates that all body piercings must be removed prior to shipment to Recruit Training Depots or Officer Candidate School.		
Location(s) of applicant's current, removed, concealed, covered, or altered tattoos, brands, markings, or ornamentation and applicant's statements will be documented in Part V of this Screening Form. Removed, concealed, covered or altered tattoos need to be annotated as such (i.e. removed) with full description of the original marking.		
PART II. CERTIFICATION		
I have completely disclosed the full extent of my tattoos, brands or body ornamentation to include those removed or altered.		
Printed Name of Applicant or Candidate	Signature of Applicant or Candidate	Date
Printed Name of Recruiting Rep or Certifying Officer	Signature of Recruiting Rep or Certifying Officer	Date
PART III. RECERTIFICATION (ONLY IF MARKED "NO" TO QUESTION 1)		
Have there been any changes to Part I of this Tattoo Screening Form after the date of signing Part II?	YES	NO
I certify the information previously given on the Tattoo Screening Form remains the same. If any change is indicated, parts IV through VI will be completed and forwarded to the Commanding Officer or appropriate authority prior to shipment to recruit training or request for appointment.		
Printed Name of Applicant or Candidate	Signature of Applicant or Candidate	Date
Printed Name/Signature of MEPS LCNO or Reviewing Officer (Rank, Billet)		Date

NAME (Last, First, MI)	LAST 4 SSN	DATE
PART IV. REVIEW		
a. To be filled out for all enlisted applicants		
<p>If applicant responded "yes" to questions 1 and/or 2, their tattoo/markings or history thereof must be reviewed by a commissioned officer to determine eligibility. If the applicant responded "yes" to questions 3 through 7, the applicant is ineligible (with exception of a single band tattoo more than 3/8 of an inch in width on one finger of each hand)for enlistment without a Region CG level adjudication. Digital photos are required for all reviews. Under no circumstances will any applicant be photographed in less clothing than the standard warm weather physical training uniform. Only the visible portion of tattoos outside of regulation are to be photographed for consideration. Applicants may hand draw pictures of tattoos not visible indicating content and location.</p>		
Commissioned Officer's Reviewing Comments:		
<input type="checkbox"/> RS Review <input type="checkbox"/> Region Adjudication required <input type="checkbox"/> RA Review required (PSR)		
NAME/SIGNATURE OF COMMISSIONED OFFICER	RANK	BILLET
ALL QUESTIONABLE BODY MARKINGS ON REGARDING CONTENT OR LOCATION WILL BE FORWARDED TO THE APPROPRIATE DECISIONING AUTHORITY FOR APPROVAL/REVIEW.		
b. To be filled out for all Officer candidates		
<p>(1) If candidate responded "yes" to questions 1 and/or 2, their tattoo/markings or history thereof must be reviewed by a commissioned officer to determine eligibility. If the applicant responded "yes" to questions 3 through 7, the applicant is ineligible (with exception of a single band tattoo more than 3/8 of an inch in width on one finger of each hand)for enlistment without a MCRC level adjudication review.</p>		
<p>(2) Digital photos are required for all reviews. Under no circumstances will any applicant be photographed in less clothing than the standard warm weather physical training uniform. Only the visible portion of tattoos outside of regulation are to be photographed for consideration. Candidates may hand draw pictures of tattoos not visible indicating content and location. Cross-check drawings with DD Form 2808 Medical Examination, Block 37 documents for consistency.</p>		
<p>(3) All questionable body markings in regards to content, or location will be forwarded to the appropriate authority for approval/review. Check appropriate review authority:</p>		
<input type="checkbox"/> <u>Recruiting Station</u> : Review tattoos for applicants applying for PLC, OCC, and Four Year NROTC Scholarship programs.		
<input type="checkbox"/> <u>Marine Corps Recruiting Command</u> : Review tattoos for applicants applying for all other commissioning and Warrant Officer programs.		
NAME/SIGNATURE OF REVIEWING OFFICER	RANK	BILLET

GUIDANCE FOR COLOR PHOTOS

Required if applicant currently has or has ever had any body marking(s) (tattoos, brands, piercings, etc). This includes any body markings previously waived or documented for "Grandfathering" purposes.

- Must provide full body all four angle photos in green on green PT gear (shirt and shorts)
- Must use tattoo tool or ruler for body marking(s) near restricted areas to verify body markings are in accordance with MCO 1020.34H
- For body marking(s) visible in PT gear, must submit clear color photos in appropriate photo boxes of the tattoo screening form
- For body marking(s) not fully visible in PT gear, must be hand drawn.
- All body marking(s) must have a written description including:
 - Size in inches
 - Description
 - Location
 - Meaning

NAME (Last, First, MI)	LAST 4 SSN or EDIPI	DATE
<div>FRONT PROFILE</div>	<div>REAR PROFILE</div>	
<div>LEFT PROFILE</div>	<div>RIGHT PROFILE</div>	

NAME (Last, First, MI)		LAST 4 SSN		DATE					
PART V. DOCUMENTATION									
The section below will be used to document any tattoo identified as a "YES" in section I. Insert photos by clicking in the square provided and selecting the appropriate photo. If additional space is needed use the addendum to this form.									
<div>TATTOO NUMBER ONE</div> <div></div>			<div>TATTOO NUMBER TWO</div> <div></div>						
						Size (in inches)			
						Description			
						Location			
						Reason for review			
<div>TATTOO NUMBER THREE</div> <div></div>			<div>TATTOO NUMBER FOUR</div> <div></div>						
						Size (in inches)			
						Description			
						Location			
						Reason for review			

**ADDENDUM TO
MARINE CORPS RECRUITING COMMAND TATTOO SCREENING FORM**

NAME (Last, First, MI)		LAST 4 SSN		DATE	
TATTOO NUMBER			TATTOO NUMBER		
Size (in inches)			Size (in inches)		
Description			Description		
Location			Location		
Reason for review			Reason for review		
TATTOO NUMBER			TATTOO NUMBER		
Size (in inches)			Size (in inches)		
Description			Description		
Location			Location		
Reason for review			Reason for review		

NAME (Last, First, MI)	LAST 4 SSN	DATE
Applicant Personal Statement for each tattoo identified above:		
<p><i>*NOTE: Each statement will identify the corresponding tattoo number above and answer the following questions in the applicants own words:</i></p> <p><i>What does the tattoo look like (detailed description)?</i></p> <p><i>When, Where, and Why did you get this tattoo?</i></p> <p><i>What does this tattoo personally mean to you?</i></p>		

NAME (Last, First, MI)	LAST 4 SSN	DATE
PART VI. CERTIFICATION		
I certify that I have completely disclosed the full extent of my tattoos, brands or body ornamentation to include those removed or altered.		
Printed Name of Applicant or Candidate	Signature of Applicant or Candidate	Date
Printed Name of Recruiting Rep or Certifying Officer	Signature of Recruiting Rep or Certifying Officer	Date
PART VII. RECERTIFICATION		
Have there been any changes to Part I of this Tattoo Screening Form after the date of signing Part VI?	YES	NO
I certify the information previously given on the Tattoo Screening Form remains the same. If any change is indicated, parts IV through VI will be completed and forwarded to the Commanding Officer or appropriate authority prior to shipment to recruit training or request for appointment.		
Printed Name of Applicant or Candidate	Signature of Applicant or Candidate	Date
Printed Name of Recruiting Rep or Certifying Officer	Signature of Recruiting Rep or Certifying Officer	Date

DRUG STATEMENT FOR ENLISTED TO OFFICER/NROTC APPLICANTS

If the answer to block 14 of "MCRC Regular Officer Programs (ON/E) Application and Program Information Sheet" is "YES", set forth the full circumstances below, including approximate times, amounts taken, and period over which taken.

a. Type of drug (or drugs) used: _____

b. Approximate number of times used: _____

c. Amounts taken: _____

d. Methods by which taken: _____

e. Inclusive dates of use (be specific): _____

f. Were you convicted or arrested for the drug use admitted?

g. Circumstances under which the drug use occurred (attach additional sheets if necessary):

(Signature of witnessing Officer)

DATE

(Signature of Applicant)

NAME: (LAST, FIRST, MIDDLE)

SSN

PROGRAM

NON TRAFFIC ARREST FORM

This form is to be utilized if you were charged with and/ or convicted of any alcohol related traffic offensive, or any other non-traffic arrest, no matter how minor. Answer the following questions and then write a concise statement addressing the incident.

a. Month and year of violation: _____

b. Place where violation occurred: _____

c. Original charge: _____

d. Charge to which convicted or to which a guilty plea was entered:

e. Penalty, fine, or other disposition:

APPLICANTS STATEMENT ADDRESSING THE CIRCUMSTANCES SURROUNDING THIS INCIDENT. (USE ADDITIONAL SHEETS IF NECESSARY)

(Signature of witnessing Officer)

(Date)

(Signature of Applicant)

NAME: (LAST, FIRST, MIDDLE)

SSN

PROGRAM

MINOR TRAFFIC PAGE

List all minor traffic violations and provide the information listed below. If you are unsure of any information or have questions regarding this form, please consult your command Marine officer representative.

Any alcohol related traffic offense is NOT considered a minor infraction and should be explained on the NON-TRAFFIC ARREST FORM.

1. Month and year of violation
2. Place where violation occurred (City and State)
3. Original Charge
4. Charge of which convicted or to which guilty plea was entered
5. Penalty or other disposition. If fined, indicate the amount.

	FIRST OFFENSE		SECOND OFFENSE
1.		1.	
2.		2.	
3.		3.	
4.		4.	
5.		5.	
	THIRD OFFENSE		FOURTH OFFENSE
1.		1.	
2.		2.	
3.		3.	
4.		4.	
5.		5.	
	FIFTH OFFENSE		SIXTH OFFENSE
1.		1.	
2.		2.	
3.		3.	
4.		4.	
5.		5.	

(APPLICANT'S SIGNATURE)

(DATE)

(OFFICER SIGNATURE)

(APPLICANT LAST, FIRST, MIDDLE)

SSN

PROGRAM

VERIFICATION OF MEDICAL SCREENING

The following is merely an example which can be used by any medical professional with HIPAA training.

The purpose of the letter is to inform commands that the Marine applying has been medical screened and is currently full duty. This allows commands to know the Marine has completed the physical screening aspect of the application without having to look at the individual's personal medical information.

The letter does not have to be on letterhead; a memo letter from a Corpsman or Doctor to the Commanding Officer will satisfy the requirement.

Marines should not route their medical documents with the application package. They should submit the medical portion separate from the completed application (two files, one email) to MCRC by the established deadlines using DoDSAFE to the organizational mailbox:
e_ onboard@marines.usmc.mil



UNITED STATES NAVY
UNIT LETTERHEAD
STREET
CITY ST 12345-1234

1040
Code
Date

From: Military Treatment Facility, (Unit)
To: Commanding Officer, (Applicant's Unit)

Subj: VERIFICATION OF MEDICAL SCREENING FOR BOARD PURPOSES IN THE
CASE OF RANK FULL NAME EDIPI/PMOS USMC(R)

Ref: (a) MARADMIN XXX/YY (Current board announcement)

1. Per the reference, the DD Form 2808 and DD Form 2807-1 have been filled out accurately and in their entirety on (Rank Last Name). Furthermore, these forms meet the time requirements established by the reference.
2. (Rank Last Name) understands they are responsible and obligated to provide all required medical documentation, per the reference, including an Individual Medical Readiness (IMR) report to Marine Corps Recruiting Command with their complete package.
3. Point of contact for this matter is (Rank Full Name), commercial telephone numbers and electronic mail address.

MEDICAL DEPARTMENT SIGNATURE