

MCRC FROST CALL 014-22 DATED 31 JANUARY 2022

From: Commanding General, Marine Corps Recruiting Command

SUBJ: GUIDANCE FOR MARINE ENLISTED COMMISSIONING EDUCATION PROGRAM AVIATION AND CYBER PROGRAM CHANGES FOR FISCAL YEAR 2023 AND BEYOND

Ref: (a) MCRCO 1100.2A, Officer Commissioning Manual
(b) MCRC FROST CALL 048-21

Encl: (1) MECEP Aviation Service Agreement
(2) MECEP Cyber Service Agreement
(3) Sensitive Compartmented Information Pre-nomination Screening Interview

1. Purpose. To provide updated guidance on program change process for Marine Enlisted Commissioning Education Program (MECEP) Student Naval Aviators and Cyber Officers.

2. Background. References (a) and (b) establish the requirements, standards for eligibility, and approval authorities for both cyber and aviation program changes. Aviation allocations are projected to continue decreasing until FY 24 in order to decrease time to train and excessive costs. Historically, aviation program changes have been “first come, first serve” which in years past has left spring or early fall graduates with no chance in receiving an Aviation Guarantee. This new process will ensure everyone is given an opportunity.

3. Information. In order to ensure fair selection of those requesting program changes to Aviation or Cyber, MCRC will require all MECEP Program Changes to be submitted by the end of the second week in June for the following fiscal year. For example, FY23 Program Changes will be due on 10 June 2022. Marines and Marine Officer Instructors will be notified of program change approvals or disapprovals on or about two weeks after the package deadline. For example, 24 June 2022 for FY23. Program Change Requests must contain the following:

- a. PNS endorsement
- b. MECEP program change request
- c. Personal Essay on why the Marine wants to be a SNA or Cyber Officer
- d. ON/E Information Sheet
- e. Associated Service Agreement
- f. Transcripts
- g. ASTB Scoresheet (SNA)
- h. NAMI PQ Letter (SNA)
- i. Sensitive Compartmented Information Pre-nomination Screening Interview (CYBER)

Marines are encouraged to include additional letters of recommendation, but it is not a requirement. For Aviation Program Changes, it will be a requirement to have the NAMI Qualification Letter by the due date of the Request for Appointment for this Fiscal Year, for all follow-on fiscal years the NAMI PQ Letter will be due with the package. Failure to submit the NAMI Qualification Letter with the RFA in FY23 will result in loss of Aviation Program Change and the Marine will be reverted back to a ground contract.

4. Action. Effective immediately and consistent with reference (b), all requests for program changes will be routed to MCRC Officer Programs for review and approval. However, this Frost Call only applies to MECEP Marines. Marine Officer Instructors and Assistant Marine Officer Instructors must ensure timely and accurate submission of packages ensuring desired Marines' packages are forwarded for consideration. Late submissions will not be entertained.

5. Point of contact is Capt Amos Mason, G-3, Naval and Enlisted Programs, at (703) 432-9685 or amos.mason@marines.usmc.mil or MECEPRFA@marines.usmc.mil.



W. C. COOK
By direction

**SERVICE AGREEMENT (1100)
MARINE ENLISTED COMMISSIONING EDUCATION PROGRAM STUDENT NAVAL AVIATOR**

NAVMC 11878 (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) 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 **MECEP 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 **MECEP 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 **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 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 **MECEP 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 **MECEP 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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ENCLOSURE (1)

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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 MECEP 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 - MARINE ENLISTED COMMISSIONING EDUCATION PROGRAM STUDENT NAVAL AVIATOR

ANNEX C

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ENCLOSURE (1)

**STATEMENT OF UNDERSTANDING – SERVICE AGREEMENT (1100)
MARINE ENLISTED COMMISSIONING EDUCATION PROGRAM CYBER OFFICER**

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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) CYBER** program of the United States Marine Corps (USMC), I hereby acknowledge that:

a. Final approval of my application for enrollment in the **MECEP CYBER** 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 CYBER** 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 CYBER** program and, when eligible, have the opportunity, if I desire, to attend the next available 10 week OCS 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 CYBER** 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 CYBER** 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. 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 (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 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 successful completion of OCS and acceptance of appointment to commissioned grade, I will be assigned a primary Military Occupational Specialty (MOS) of Basic Cyberspace Officer (1701) 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 the first available Cyber Officer Course if I am qualified for such assignment, which includes possessing at least an Interim Top Secret/Sensitive Compartmented Information (TS/SCI) security clearance. Any projected delay in my assignment to the Cyber Officer Course may result in my temporary assignment to duties as dictated by the needs of the USMC until the Cyber Officer Course can be started.

j. After successful completion of TBS, any period of delay in my assignment to the Cyber Officer Course will be counted towards the seventy-two (72) month obligation, set forth in paragraph 2.a.

k. Upon graduation from the Cyber Officer Course, I will be assigned a primary MOS of Cyberspace Officer (1702).

LAST NAME, FIRST AND MIDDLE INITIAL OF APPLICANT

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ANNEX E

ENCLOSURE (2)

**STATEMENT OF UNDERSTANDING – SERVICE AGREEMENT (1100)
MARINE ENLISTED COMMISSIONING EDUCATION PROGRAM CYBER OFFICER**

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

a. Seventy-two (72) months from the date of my successful completion of the Cyber Officer Course; or

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

(1) I fail to meet the requirements for assignment to the Cyber Officer Course;

(2) I, notwithstanding paragraph 2.b.(3), am separated from the Cyber Officer Course for any reason, including by reason of denial of a TS/SCI security clearance;

(3) I am separated from the Cyber Officer Course as a result of my own request or by reason of academic failure; and I further understand that if this occurs, in addition to the active duty MSO set forth in paragraph 2.b., I agree to serve an additional period of active duty equal to the time I spent in the Cyber Officer Course (contingent upon approval from CMC); or

(4) I, after completing the Cyber Officer Course, am denied a TS/SCI security clearance.

3. I understand that if I am disenrolled from the Cyber Officer Course for any reason I will be assigned as an unrestricted ground MOS 8001 and further re-designated based on the needs of the Marine Corps, for the remaining active duty MSO.

4. I understand that participation in any Marine Corps Financial Assistance Programs or incentive programs may incur additional obligated active duty service.

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

a. 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.

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

(1) 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.

(2) 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.

6. 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.

7. 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 CYBER** program except as specified above. I acknowledge receipt of a copy of this document.

Signature of Witnessing Officer

Full Name and Grade of Witness

Signature of Applicant

Full Name of Applicant

Date

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ANNEX E

ENCLOSURE (2)

Last:	First:	MI:
DoD EDI PN:	Date of Birth:	Place of Birth:
Phone:	Email:	
Company:	CO/XO Name:	MOS:

**SENSITIVE COMPARTMENTED INFORMATION
PRE-NOMINATION SCREENING INTERVIEW**

PURPOSE AND STATEMENT OF RIGHTS

1. The purpose of the interview is to determine your acceptability for a position requiring access to Sensitive Compartmented Information (SCI). This interview is of a personal nature. It gives you an opportunity to present additional pertinent information not reflected on your security forms. Reference used for this prescreening interview is the Intelligence Community Directive (ICD) 704, "Personnel Security Standards and Procedures Governing Eligibility for Access to Sensitive Compartmented Information and other Controlled Access Program Information".

2. The Privacy Act of 1974 requires that you be told the following:

a. The U.S. Government is authorized to ask for this information under Executive Orders 10450, 10865, 12333, and 12968; sections 3301, 3302, and 9101 of title 5, United States Code (U.S.C); sections 2165 and 2201 of title 42, U.S.C.; chapter 23 of title 50, U.S.C.; and parts 2, 5, 731, 732, and 736 of title 5, Code of Federal Regulations. Your Social Security Number (SSN) is needed to identify records unique to you. The authority for soliciting and verifying your SSN is Executive Order 9397.

b. The routine use of information developed during this interview is to assist in making a Command sponsorship determination.

3. Any information developed during this interview will be made available only to those authorities involved in the processing of your nomination, those conducting the special background investigation, and those who adjudicate your case to determine your eligibility for access to SCI, or as otherwise authorized by Executive Order or statute.

I understand the purpose of this interview. I have been advised of the provisions of the Privacy Act.

PRINTED NAME (LAST, FIRST, MI)

DATE

SIGNATURE

Last:	First:	MI:	DoD EDI PN:
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PRE-NOMINATION PERSONAL INTERVIEW QUESTIONS

For this interview you will be required to answer questions in a straightforward and, in many cases, explicit manner. Answer the following questions "YES" or "NO". Provide further information (i.e., circumstances, dates, etc.) in the appropriate remarks section on any answer that requires explanation. If additional space is needed, use the remarks section at the end of the interview form. NOTE: A DETERMINATION REGARDING INITIAL ACCEPTABILITY CANNOT BE MADE WITHOUT AMPLIFYING INFORMATION FOR YOUR ANSWERS.

YES	NO	QUESTION
<input type="checkbox"/>	<input type="checkbox"/>	a. Has it been explained and do you understand the reasons for and importance of providing open and honest responses to the questions during this interview?
<input type="checkbox"/>	<input type="checkbox"/>	b. Do you have any questions before beginning this interview?
<input type="checkbox"/>	<input type="checkbox"/>	c. Has the U.S. Government EVER investigated your background and/or granted you security clearance eligibility/access? If "YES", provide the following information: Date (estimated) security clearance eligibility/access was granted: _____ Name of Agency that took action: _____ Level of security clearance eligibility/access: _____
<input type="checkbox"/>	<input type="checkbox"/>	d. Have you EVER had security clearance eligibility/access authorization denied, suspended, or revoked? If "YES", provide the following information: Date (estimated) security clearance eligibility/access was denied, suspended, or revoked: _____ Name of Agency that took action: _____ Explanation of Circumstances: _____

REMARKS

Last:	First:	MI:	DoD EDI PN:
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1. CITIZENSHIP

YES	NO	QUESTION
<input type="checkbox"/>	<input type="checkbox"/>	a. Are you a U.S. citizen?
<input type="checkbox"/>	<input type="checkbox"/>	b. Were you born in the U.S.?
<input type="checkbox"/>	<input type="checkbox"/>	c. Are all your family members U.S. citizens? (Family members include Mother, Father, Step-Mother, Step-Father, Sister, Brother, Step Siblings, Spouse/Cohabitant, Children, In-Laws)
<input type="checkbox"/>	<input type="checkbox"/>	d. Were all of your family members born in the U.S.? (Family members include Mother, Father, Step-Mother, Step-Father, Sister, Brother, Step Siblings, Spouse/Cohabitant, Children, In-Laws)

Complete the table below as it applies to each family member.

Family Member	Holds ONLY U.S. Citizenship?	State/Country of Birth	Country(ies) of Citizenship	Country of Residence
Self	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Mother	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Father	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Step-Mother	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Step-Father	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Sister	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Brother	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Step Siblings	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Spouse/Cohabitant	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Children	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
In-Laws	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			

YES	NO	QUESTION
<input type="checkbox"/>	<input type="checkbox"/>	e. Do you have a U.S. passport?
<input type="checkbox"/>	<input type="checkbox"/>	f. Have you ever had a foreign passport? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	g. Have you ever used another name? (Provide explanation.)

1. CITIZENSHIP REMARKS

Last:	First:	MI:	DoD EDI PN:
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2. ALLEGIANCE, FOREIGN INFLUENCE, AND FOREIGN PREFERENCE

YES	NO	QUESTION
<input type="checkbox"/>	<input type="checkbox"/>	a. Are you bound by affection to anyone who is not a U.S. citizen or naturalized U.S. citizen, or who holds dual citizenship with the U.S. and another country? (Complete the Foreign Contact Sheet at end of interview form.)
<input type="checkbox"/>	<input type="checkbox"/>	b. Do you or any member of your family maintain ties of affection, obligation, friendship or kinship to any individual who is not a U.S. citizen or naturalized U.S. citizen, to include those through domestic help, regular contacts on social networking sites, chat rooms, instant messenger, and online bulletin boards, etc? (Complete the Foreign Contact Sheet at end of interview form.)
<input type="checkbox"/>	<input type="checkbox"/>	c. Do any members of your family or anyone you are bound by affection work for or have a relationship with a foreign country's military, intelligence service, diplomatic, security forces, militia, or other defense force or government agency? (Complete the Foreign Contact Sheet at end of interview form.)
<input type="checkbox"/>	<input type="checkbox"/>	d. Have you or any family member ever sponsored a foreign citizen to come to the U.S. for any reason to include work, school, residence, etc.? (Complete the Foreign Contact Sheet at end of interview form.)
<input type="checkbox"/>	<input type="checkbox"/>	e. Have you ever served as a civilian or military member in a foreign country's military, intelligence service, diplomatic, security forces, militia, or other defense force or government agency? (Provide the name of the foreign organization, the period of service, and description of circumstances of your association with this organization.)
<input type="checkbox"/>	<input type="checkbox"/>	f. Have you ever had contact with anyone representing a non U.S. intelligence/security service or anyone associated with any terrorist group? Such contact includes personal meetings, written correspondence, telephonic contact, e-mails, or any other form of communication. (Provide the name of the individual, the name of the service or group, a description of the contact and country of origin for the contact.)
<input type="checkbox"/>	<input type="checkbox"/>	g. Do you have a sense of allegiance or loyalty to another country other than the U.S.? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	h. Do you have any reason to believe anyone would question your allegiance or loyalty to the U.S.? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	i. Are you now or have you ever been a member of any organization associated with or contributed to any movement or group that advocates the overthrow of U.S. government? (Provide the full name of the organization, the dates of your involvement, positions held or contributions made to the organization, and a description of the nature of the reasons for your involvement with the organization.)
<input type="checkbox"/>	<input type="checkbox"/>	j. Have you ever participated in any public demonstration against U.S. policy (foreign or domestic) to include anti-war protest? (Provide the dates and the policy you demonstrated against.)
<input type="checkbox"/>	<input type="checkbox"/>	k. Have you ever traveled outside of the U.S for personal reasons? (Provide country(ies) visited, dates of travel, purpose of visit, and whether travel was personally or privately funded.)
<input type="checkbox"/>	<input type="checkbox"/>	l. Have you or any family member ever been offered a job, asked to work as a consultant, or considered employment with a foreign person, business, organization, or government? (Provide the full name of person or organization, date(s), and description of position.)
<input type="checkbox"/>	<input type="checkbox"/>	m. Have you or any family member ever been involved in any other type of business venture with any foreign person, business, organization, or government? (Provide the full name of family member, the dates of involvement, and description of the nature of involvement.)
<input type="checkbox"/>	<input type="checkbox"/>	n. Have you ever voted in an election of a foreign country? (Provide date(s) and country(ies).)

Last:	First:	MI:	DoD EDI PN:
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YES	NO	QUESTION
<input type="checkbox"/>	<input type="checkbox"/>	o. Have you ever been directed to seek employment with the U.S. government by a foreign entity? (Provide the name of the individual/entity, the country they represented, and the time frame in which you were directed to seek employment.)
<input type="checkbox"/>	<input type="checkbox"/>	p. Has anyone ever solicited you for personal or official government information? (Provide date(s) and describe the circumstances of the approach.)

2. ALLEGIANCE, FOREIGN INFLUENCE, AND FOREIGN PREFERENCE REMARKS

3. SEXUAL BEHAVIOR:

YES	NO	QUESTION
<input type="checkbox"/>	<input type="checkbox"/>	a. Have you ever been accused of sexual harassment? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	b. Since age 18, have you been charged with committing a sexual act with a person less than 18 years of age? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	c. Have you ever used illegal methods, including having induced, coerced by force or intimidation, to engage another person into a sexual act? (Provide explanation.)

3. SEXUAL BEHAVIOR REMARKS

Last:	First:	MI:	DoD EDI PN:
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4. PERSONAL CONDUCT:

YES	NO	QUESTION
<input type="checkbox"/>	<input type="checkbox"/>	a. Do you associate or have a relationship with someone who has a criminal record such as a known drug user, drug trafficker, or gang member; or someone who participates in criminal activities? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	b. Have you ever refused or failed without reasonable cause, to undergo or cooperate with security processing, meet with an investigator for a subject interview, complete security forms, cooperate with medical or psychological evaluation, or complete a polygraph examination? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	c. Have you ever deliberately omitted, concealed, or falsified relevant facts from any personnel security questionnaire? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	d. While in another country, have you ever engaged in any activity that is illegal in that country or that is legal in that country, but illegal in the U.S.? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	e. Would any of your past actions result in anyone characterizing you as being indiscreet, unstable, or of questionable character? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	f. Have you ever been dismissed or fired from a job, quit a job as an alternate to being fired, or left a job under any other unfavorable circumstances? (Provide reason and date.)
<input type="checkbox"/>	<input type="checkbox"/>	g. Have you ever received a written warning, been officially reprimanded, suspended, or disciplined for misconduct in the workplace, such as a violation of security or work place policy? (Provide reason and date.)
<input type="checkbox"/>	<input type="checkbox"/>	h. Have you ever been accused of or stolen anything from an employer? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	i. Are there any incidents in your background, which might make you subject to blackmail (such as extra-marital affairs, undetected theft, fraud, or embezzlement)? (Provide explanation.)

4. PERSONAL CONDUCT REMARKS

5. FINANCIAL CONSIDERATIONS

LIST LOAN/CREDITOR <small>(list all loans/credit cards in your name as primary or co-signor)</small>	LIST CURRENT OWED AMOUNT

**FOR OFFICIAL USE ONLY - PRIVACY SENSITIVE
ANY MISUSE OR UNAUTHORIZED DISCLOSURE MAY RESULT IN CIVIL AND/OR CRIMINAL PENALTIES**

Last:	First:	MI:	DoD EDI PN:
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YES	NO	QUESTION
<input type="checkbox"/>	<input type="checkbox"/>	a. Do you, your spouse, cohabitant, or dependent children, have or maintain a business-like association with any foreign government, intelligence service, defense industry, individual, group, company, or do you or they own property, stocks, bonds, investments, bank accounts, ownership of corporate entities, or corporate interests or businesses in which you or they have direct control or direct ownership? (Exclude financial interests in companies or diversified mutual funds that are publicly traded on a U.S. Exchange.)
<input type="checkbox"/>	<input type="checkbox"/>	b. As a U.S. citizen, have you, your spouse, cohabitant, or dependent children ever received or are eligible to receive in the future, any educational, medical, retirement, social welfare, or other such benefit from a foreign individual, foreign entity, or foreign country? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	c. Do you now or have you ever provided financial support to any individual or organization, to include charity organizations, located in a foreign country? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	d. Do you now, or have you ever had a history of indebtedness or experienced financial difficulties? (Provide the reason(s) for the financial issue(s) and the current status.)
<input type="checkbox"/>	<input type="checkbox"/>	e. Have you ever filed a petition under Chapters 7, 11, or 13 of the bankruptcy code? (Provide the date the bankruptcy was filed and reason for filing.)
<input type="checkbox"/>	<input type="checkbox"/>	f. Have you ever short sold a residence or returned a residence to a lender? (Provide date and circumstances.)
<input type="checkbox"/>	<input type="checkbox"/>	g. Have you ever had indebtedness aggravated by gambling? (Provide the date range, a description of your financial issue(s), an estimate of the amount of gambling losses incurred, and action(s) taken to rectify your financial issue(s) due to gambling.)
<input type="checkbox"/>	<input type="checkbox"/>	h. Have you ever failed to file or pay federal, state, or other taxes (city, county, property) when required by law or ordinance? (Provide year and reason(s) for your failure to file or pay required taxes.)
<input type="checkbox"/>	<input type="checkbox"/>	i. Have you ever written checks, which you knew would not be covered by sufficient funds? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	j. Have you ever been the subject of a foreclosure(s), repossession(s), lien(s) or unfavorable judgment(s)? (Provide date, circumstances, and current status.)
<input type="checkbox"/>	<input type="checkbox"/>	k. Have you ever had any wage garnishments? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	l. Have you ever had any accounts suspended, charged off, or cancelled for failure to pay as agreed? (Provide date, circumstances, and current status.)
<input type="checkbox"/>	<input type="checkbox"/>	m. Have your accounts ever been turned over to a collection agency? (Provide date, circumstances, and current status.)
<input type="checkbox"/>	<input type="checkbox"/>	n. Have you ever been evicted for non-payment of rent or damages? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	o. Have you ever defaulted on any type of loan? (Provide date, circumstances, and current status.)
<input type="checkbox"/>	<input type="checkbox"/>	p. Have you ever been delinquent on alimony or child support? (Provide date, circumstances, and current status.)
<input type="checkbox"/>	<input type="checkbox"/>	q. Are any of your payments not current within the past 30 days? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	r. Have you ever missed more than one consecutive payment on any debt? (Provide the type of debt and the reason(s) for the delinquency.)
<input type="checkbox"/>	<input type="checkbox"/>	s. Have you ever been indifferent to financial obligations or stated intentions not to meet such obligations? (Provide explanation.)

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YES	NO	QUESTION
<input type="checkbox"/>	<input type="checkbox"/>	t. Do you have any other source of income, such as spouse's income, inheritance, alimony, child support, etc.? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	u. Do you possess any explained or unexplained affluence that could be subject to scrutiny by investigators? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	v. Do you have any reason to believe that there is any unfavorable credit information about you on file with any credit bureau, court or business? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	w. Is there any evidence of financial irresponsibility on your part that you have not listed that could be found out by investigators in the process of your investigation? (Provide explanation.)

5. FINANCIAL CONSIDERATIONS REMARKS		

6. ALCOHOL CONSUMPTION/DRUG INVOLVEMENT

What is your average consumption of alcoholic beverages each week? _____

YES	NO	QUESTION
<input type="checkbox"/>	<input type="checkbox"/>	a. Do you have or have you ever had any alcohol related incidents such as driving under the influence or driving while intoxicated, fighting, child or spouse abuse, disturbing the peace, or other incidents or concerns? (Provide explanation of incident and any treatments.)
<input type="checkbox"/>	<input type="checkbox"/>	b. Has your use of alcohol had a negative impact on your work performance, your professional or personal relationships, your finances, or resulted in intervention by law enforcement/public safety personnel? (Provide date and circumstances.)

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YES	NO	QUESTION
<input type="checkbox"/>	<input type="checkbox"/>	c. Have you been diagnosed as an alcohol abuser or alcohol dependent by a medical professional? (Provide date of diagnosis, explanation, and treatment, if any.)
<input type="checkbox"/>	<input type="checkbox"/>	d. Are you currently, or have you ever illegally used, purchased, manufactured, cultivated, or handled a drug or controlled substance to include cocaine, steroids, inhalants, marijuana, narcotics, and designer drugs? (Provide type of drug, date(s) of use and an estimate of number of times used.)
<input type="checkbox"/>	<input type="checkbox"/>	e. Have you intentionally misused prescription drug(s), regardless of whether the drugs were prescribed for you or someone else? (Provide date, circumstances, and whether or not you took action to receive counseling or treatment.)
<input type="checkbox"/>	<input type="checkbox"/>	f. Have you ever been court ordered or advised by a medical professional or counselor to seek counseling or treatment as a result of your use of alcohol, or illegal use of drugs or controlled substances? (Provide date and type of drug or controlled substance for which you were treated.)
<input type="checkbox"/>	<input type="checkbox"/>	g. Do any members of your family have a history of alcohol or drug abuse? (Provide explanation.)

6. ALCOHOL CONSUMPTION/DRUG INVOLVEMENT REMARKS

Last:	First:	MI:	DoD EDI PN:
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7. PSYCHOLOGICAL CONDITIONS

Note: Mental health counseling in and of itself is not a reason to revoke or deny eligibility for access to classified information or for a sensitive position, suitability or fitness to obtain or retain Federal employment, fitness to obtain or retain contract employment, or eligibility for physical or logical access to federally controlled facilities or information systems.

YES	NO	QUESTION
<input type="checkbox"/>	<input type="checkbox"/>	a. Have you consulted with a health care professional regarding an emotional or mental health condition or were you hospitalized for such a condition? Answer "NO" if the counseling was for any of the following reasons and was not court-ordered or Command directed: <ul style="list-style-type: none"> • Strictly marital, family, grief not related to violence by you; or • Strictly related to adjustments from service in a military combat environment. <p>*** Remarks are NOT required for this question. The security representative is not authorized to ask for additional information regarding mental health counseling. ***</p>
<input type="checkbox"/>	<input type="checkbox"/>	b. Has a court or administrative agency ever declared you mentally incompetent? (Provide date and name of the court or administrative agency that declared you mentally incompetent.)
6. PSYCHOLOGICAL CONDITIONS REMARKS		

8. CRIMINAL CONDUCT

YES	NO	QUESTION
<input type="checkbox"/>	<input type="checkbox"/>	a. Are you now or have you ever been involved in any criminal or civil court action to include juvenile authorities? (Provide date of action and specific nature.)
<input type="checkbox"/>	<input type="checkbox"/>	b. Have you ever been arrested, cited, held, detained, and/or charged with a criminal offense or possible offense? (Provide date of offense, specific nature, and disposition, i.e., parole, probation, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	c. Have you ever had charges dropped or been advised that no official record would be made regarding a criminal offense? (Provide date and circumstances.)
<input type="checkbox"/>	<input type="checkbox"/>	d. Have you ever been charged with or convicted of an offense involving domestic violence or a crime of violence such as battery or assault? (Provide date and explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	e. Has there ever been a domestic violence, protective order, or restraining order issued against you for any reason? (Provide date and explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	f. Have you ever been issued a summons, citation, or ticket to appear in court in a criminal proceeding against you? (Provide date and specific nature. Do not include citations involved in traffic infractions where the fine was less than \$300 and did NOT include alcohol or drugs.)

Last:	First:	MI:	DoD EDI PN:
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YES	NO	QUESTION
<input type="checkbox"/>	<input type="checkbox"/>	g. Have you ever had minor infractions with the law, such as parking tickets, traffic tickets, or minor arrests? (Provide date, type of infraction, and outcome (fine paid))
<input type="checkbox"/>	<input type="checkbox"/>	h. Do you have any outstanding violations that are not paid? (Provide explanation to why these are not paid and your intentions to resolve.)
<input type="checkbox"/>	<input type="checkbox"/>	i. Have you ever been subject to court martial or other disciplinary procedure under the Uniform Code of Military Justice (UCMJ), such as article 15, Captain's mast, Article 135, Court of Inquiry, etc? (Provide date and description of offense(s) for which you were charged.)
<input type="checkbox"/>	<input type="checkbox"/>	j. Have you ever received a written reprimand or a negative page 11? (Provide date and circumstances.)
<input type="checkbox"/>	<input type="checkbox"/>	k. Have you ever received an unsatisfactory efficiency report? (Provide date and circumstances.)
<input type="checkbox"/>	<input type="checkbox"/>	l. Have you ever been discharged or dismissed from the Armed Forces under <i>dishonorable</i> OR <i>other than honorable</i> conditions? (Provide date and circumstances.)
<input type="checkbox"/>	<input type="checkbox"/>	m. Are you now or have you ever been on parole or probation? (Provide date(s) and reason(s) for parole or probation.)
<input type="checkbox"/>	<input type="checkbox"/>	n. Have you ever been convicted in any court of the U.S. of a crime and sentenced to imprisonment for a term exceeding one year? (Provide date of the offense, all the charges brought against you for this offense, and the outcome of each charge, i.e., found guilty, found not-guilty, charge dropped, "nolle pros", etc.)
<input type="checkbox"/>	<input type="checkbox"/>	o. Have you ever been subject of an investigation conducted by a military investigator or counterintelligence agency, including command investigations? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	p. Has anyone you maintain a relationship with been arrested, cited, held, detained, and/or charged with a criminal offense or possible offense? (Provide explanation.)

8. CRIMINAL CONDUCT REMARKS

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9. HANDLING PROTECTED INFORMATION

YES	NO	QUESTION
<input type="checkbox"/>	<input type="checkbox"/>	a. Have you ever been involved in a security violation? (Provide date and explanation of incident.)
<input type="checkbox"/>	<input type="checkbox"/>	b. Have you ever intentionally disclosed classified material to unauthorized personnel? (Provide date and explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	c. Have you ever engaged in, or been approached to engage in espionage, or give or sell any government classified or unclassified material to persons not authorized to receive it? (Provide date and explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	d. Have you ever deliberately disregarded security regulations, which resulted in the compromise of classified information? (Provide date and explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	e. Have you ever violated security regulations such as transporting classified information home or carrying classified while in a travel status without proper authority? (Provide date and explanation.)
9. HANDLING PROTECTED INFORMATION REMARKS		

10. USE OF INFORMATION SYSTEMS

YES	NO	QUESTION
<input type="checkbox"/>	<input type="checkbox"/>	a. Have you ever been accused of "noncompliance" with rules, procedures, guidelines or regulations pertaining to any information technology system which may raise security concerns about your reliability and trustworthiness, calling into question the willingness or ability to properly protect sensitive systems, networks, and information? (Provide explanation.)
<input type="checkbox"/>	<input type="checkbox"/>	b. Have you ever illegally or without proper authorization accessed or attempted to access any information technology system or protected file, folder, or websites? (Provide date, nature of the incident or offense, location where the incident or offense took place, and description of the action, i.e., administrative, criminal, or other, taken as a result of this incident.)
<input type="checkbox"/>	<input type="checkbox"/>	c. Have you ever introduced, removed, or used hardware, software, or media in connection with any information technology system without authorization, when specifically prohibited by rules, procedures, guidelines or regulations or attempted any of the above? (Provide date, nature of the incident or offense, location where the incident or offense took place, and description of the action, i.e., administrative, criminal, or other, taken as a result of this incident.)
10. USE OF INFORMATION SYSTEMS REMARKS		

Last:	First:	MI:	DoD EDI PN:
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PROVIDE ADDITIONAL REMARKS HERE
IDENTIFY THE SECTION AND QUESTION YOUR REMARK REFERS TO (i.e., 2a, 8p, etc.)

Last:		First:		MI:
DoD EDI PN:		Date of Birth:		Place of Birth:
Phone:			Email:	
Company:		CO/XO Name:		MOS:

FOREIGN CONTACT SHEET

Identify Question Contact is Provided in Reference To (i.e., 2a, 2b, 2c, 2d)	Full Name of Contact	Citizenship	Approx Age	Sex	Profession	Current Residence	Relationship to You	Year You Established Contact With	Method of Correspondence
EXAMPLE: 2b	Joe Smith	France	54	M	Teacher at X University	Paris, France	Friend	2007	Facebook
EXAMPLE: 2c	Sally Jones	Australia	32	F	Australian Intel Officer	Sydney, Australia	Close Friend of Family	2002	Face-to-Face, email