NROTC PROGRAM
APPLICANT PERSONAL DATA RECORD

OMB Control Number: 0703-0026, Exp. ________________

AGENCY DISCLOSURE STATEMENT

The public reporting burden for this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, Executive Services Directorate, Information Management Division, 4800 Mark Center Drive, East Tower, Suite 02G09, Alexandria, VA 22350-3100 (0703-0026). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

PLEASE DO NOT RETURN YOUR RESPONSE TO THE ABOVE ADDRESS.

Responses should be sent to: Commander
Naval Service Training Command
2601A Paul Jones Street
Great Lakes, IL 60088

PLEASE READ THE FOLLOWING STATEMENT REQUIRED BY THE PRIVACY ACT OF 1974 BEFORE COMPLETING THE APPLICATION.

1. AUTHORITY: The authority to request this information is contained in: 5 U.S.C. § 301 (Authorizing Departmental Forms and Regulations); 10 U.S.C. § 2107 (Financial Assistance Program); and Executive Order 9397 (Use of Social Security Numbers).

2. PRINCIPAL PURPOSE(S): The information you provide will be used to determine whether you qualify, and should be nominated for, an NROTC Scholarship. If you are nominated, the information will be used to enroll you into NROTC and will be used by the Navy in its management of the NROTC program. The following systems of records notices cover the collection of this information: N01131-1 located at http://dpclo.defense.gov/Privacy/SORNsIndex/DODComponentArticleView/tabid/7489/Article/6411/n01131-1-1.aspx, and N0180-3 located at http://dpclo.defense.gov/Privacy/SORNsIndex/DODComponentArticleView/tabid/7489/Article/6410/n01080-3.aspx

3. ROUTINE USE(S): Information provided on the application will be used to screen and select individuals to receive NROTC Scholarships, to maintain data on the NROTC scholarship program, to compare to scholarship applicants from previous or subsequent years, and to provide academic data and contact information to Navy activities and admissions officials at colleges and
universities so they can contact applicants for recruitment purposes. Information you provide in this application is protected by the Privacy Act and will not be released outside the Department of Defense without your permission unless it comes within an exception to the Act or one of the routine uses in 32 C.F.R § 701.112, http://www.privacy.navy.mil/ and the routine uses set forth here. If you are nominated for an NROTC Scholarship, the information will be released to the top five schools you indicated on your application. Your information and notification of status may also be provided to your high school so they may assist with the final stages of the process.

4. DISCLOSURE: The social security number (SSN) is required at the time of application to ensure proper identification of the applicants. There are times applicants have the same names, therefore the SSN is required to ensure proper identification. Providing the requested information is voluntary. However, failure to do so may result in our inability to process your application for the NROTC program.

FULL NAME:
Last __________________  First _________________ Middle _____
Suffix (Jr., Sr., II, III, IV) _____

DATE OF BIRTH: Month__________ Day__________ Year___________

CURRENT AGE: ____________  AGE AT GRADUATION: ____________

SEX:  ○ MALE  ○ FEMALE

HEIGHT (in inches) ______  WEIGHT (in pounds) _________

PROGRAM OPTION APPLYING FOR: (select only one)
○ NAVY
○ NURSE CORPS

PROGRAM TYPE APPLYING FOR: (select only one)
○ 2-YEAR SCHOLARSHIP
○ ADVANCED STANDING
○ 3-YEAR SCHOLARSHIP

PERMANENT ADDRESS (Street, City, State, Zip Code – Plus Four)
________________________________________
________________________________________
________________________________________
PHONE NUMBER  (Include area code) ___________________________

CELL PHONE  (Include area code) ___________________________

MAILING ADDRESS  (If different than Permanent Address)

______________________________________________

______________________________________________

______________________________________________

E-MAIL ADDRESS:___________________________________________________________

ARE YOU A U.S. CITIZEN?
   ○ YES
   ○ NO
   ○ In process of obtaining citizenship

HOW OBTAINED?
   ○ NATURALIZATION
   ○ BIRTH
   If a Naturalized Citizen, or born outside of the United States, of American parents submit proof of citizenship.

ARE YOU A CITIZEN OF ANY COUNTRY OTHER THAN THE U.S.?
   ○ YES
   ○ NO

IF YES, PLEASE SPECIFY COUNTRY(IES).

_________________________________________________________________________

OTHER CITIZENSHIP REMARKS:

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________
RACE (you may select up to 5)
- AFRICAN AMERICAN/BLACK
- ASIAN
- NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER
- AMERICAN INDIAN/ALASKAN NATIVE
- CAUCASIAN
- DECLINE TO RESPOND

ETHNIC BACKGROUND (Choose only one)
- AMERICAN INDIAN
- ASIAN
- ALEUT
- CHINESE
- CUBAN
- ESKIMO
- FILIPINO
- HISPANIC
- INDIA INDIAN
- JAPANESE
- KOREAN
- LATIN AMERICAN HISPANIC
- MELANESIAN
- MEXICAN
- MICRONESIAN
- OTHER PACIFIC ISLANDER
- POLYNESIAN
- PUERTO RICAN
- VIETNAMESE
- OTHER - NOT IN OPTIONS
- NONE
- UNKNOWN

DO YOU POSSESS ANY LANGUAGE PROFICIENCY OTHER THAN ENGLISH?
- YES
- NO

IF YES, WHICH LANGUAGE(S)
______________________________________________________________

HOW DID YOU OBTAIN YOUR PROFICIENCY
- CIVILIAN SCHOOL
- FOREIGN RESIDENCE
- SELF-STUDY
- OTHER___________________________________________________________
HOW PROFICIENT ARE YOU?
  o FLUENT - speak and understand virtually all types of conversations
  o LIMITED - speak and/or understand most general conversations with little difficulty
  o ELEMENTARY - speak and/or understand basic greetings and memorized phrases

LANGUAGE REMARKS: (If more than one, please note the most proficient)

_____________________________________________________________

HAVE YOU PREVIOUSLY ATTENDED OR ARE YOU CURRENTLY ATTENDING THE AIR FORCE, THE NAVAL OR MILITARY ACADEMY PREPARATORY SCHOOL?
  o YES
  o NO

IF YES, COMPLETE THE FOLLOWING
  o CURRENTLY ATTENDING
  o USNA PREP (NAPS)
  o COMPLETED DATE ____________
  o USAFA PREP/USMA PREP
  o DID NOT COMPLETE

IF ANSWER TO PREVIOUS QUESTION WAS “DID NOT COMPLETE” EXPLAIN:

________________________________________________________________________

________________________________________________________________________

HAVE YOU EVER SERVED TOURS OF EXTENDED ACTIVE DUTY DRAWING FULL PAY, FROM WHICH YOU WERE DISCHARGED OR SEPARATED TO CIVILIAN STATUS?
  o YES
  o NO

ARE YOU NOW ON ACTIVE DUTY IN THE U.S. ARMED FORCES DRAWING FULL PAY?
  o YES
  o NO

IF YES TO EITHER QUESTION ABOVE, COMPLETE THE FOLLOWING
○ REGULAR

○ RESERVE BRANCH OF SERVICE _______________________

○ GRADE/RANK _________________

○ ORGANIZATION AND LOCATION _______________________

○ DATES OF ACTIVE DUTY:
  FROM (MM/YY) _______________________

  TO (MM/YY) _______________________

○ DATES AND TYPE OF DISCHARGE OR SEPARATION:
  DATE (MM/YY) ___________

  TYPE __________________________

ARE YOU CURRENTLY A MEMBER OF A U.S. RESERVE OR NATIONAL GUARD ORGANIZATION?
  ○ YES
    ○ BRANCH OF SERVICE _______________________

    ○ GRADE/RANK ____________________________

    ○ ACTIVE    ○ INACTIVE

    ○ ORGANIZATION AND LOCATION _______________________

    ○ DATE TOUR STARTED (MM/YY) _______________________

  ○ NO

HAVE YOU EVER BEEN REJECTED FOR ANY BRANCH OF THE MILITARY SERVICE OR ROTC?
  ○ YES (IF YES, EXPLAIN IN REMARKS BELOW)
  ○ NO

REMARKS

________________________________________________________________
________________________________________________________________

________________________________________________________________
________________________________________________________________
HAVE YOU EVER BEEN A CADET/MIDSHIPMAN AT ANY OF THE U.S. SERVICE ACADEMIES OR ROTC PROGRAMS?
○ YES
○ NO

IF YES, WHICH ACADEMY/ROTC PROGRAM
○ AROTC
○ AFROTC
○ USNA
○ USCGA
○ NROTC
○ USMA
○ USAFA
○ USMMA

Dates of Attendance
From: _______________ To: _______________

REASON FOR DEPARTURE

_________________________________________________________________________
_________________________________________________________________________

ARE YOU CURRENTLY AN APPLICANT OF OR DO YOU INTEND TO APPLY FOR A ROTC PROGRAM OR SERVICE ACADEMY?
○ YES
○ NO

IF YES, WHICH ACADEMY/ROTC PROGRAM
○ AROTC
○ AFROTC
○ USNA
○ USCGA
○ NROTC
○ USMA
○ USAFA
○ USMMA

ARE YOU CURRENTLY IN THE DELAYED ENTRY PROGRAM? (DEP)
○ YES
○ NO

IF YES, WHAT IS YOUR SHIP DATE (MM/YY) __________________________
NAMES AND ADDRESSES OF HIGH SCHOOL(S) ATTENDED

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

DATE OF ENTRY (MM/YY) _____ / ______

DATE OF DEPARTURE (MM/YY) _____ / ______

DATE OF GRAD (MM/YY) _____ / ______

NAMES AND ADDRESSES OF COLLEGE ATTENDED/ATTENDING

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

DATE OF ENTRY (MM/YY) _____ / ______

DATE OF DEPARTURE (MM/YY) _____ / ______

DATE OF GRAD (MM/YY) _____ / ______

CURRENT OR INTENDED ACADEMIC MAJOR ________________________________

CURRENT ACADEMIC CLASS
  o Freshman (or rising Sophomore)
  o Sophomore (or rising Junior)

PLEASE LIST THE NAMES OF COURSES IN PROGRESS OR PLANNED FOR COMPLETION DURING THE CURRENT ACADEMIC YEAR

______________________________________________________________________________
HAVE YOU EVER BEEN PLACED ON SUSPENSION, PROBATION, OR EXPELLED FROM HIGH SCHOOL, COLLEGE, CIVILIAN PREPARATORY SCHOOL OR ANY OTHER ACADEMIC INSTITUTION?
○ YES
○ NO

IF YES, COMPLETE THE FOLLOWING:

DATE__________________

REASON_____________________________________________________

HAVE YOU EVER BEEN ARRESTED, CONVICTED, OR FINED FOR ANY VIOLATION OF LAW?
○ YES
   IF YES, GIVE COMPLETE DESCRIPTION OF INCIDENT(S) AND IF APPLICABLE STATE NAME AND PLACE OF COURT, NATURE OF OFFENSE, DATE AND DISPOSITION OF CASE.
      If selected as a midshipman, in order to grant a Security clearance, a complete background investigation will be made. Failure to report any such incident may be grounds for dismissal).

○ NO

REMARKS:
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

ATHLETIC ACTIVITIES
IDENTIFY THOSE SPORTS AND ANY RECOGNITION RECEIVED FOR YOUR
PARTICIPATION; INCLUDE SPORTS IN HIGH SCHOOL, COLLEGE OR IN THE COMMUNITY.

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________________________________________________________________
________________________________________________________________
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________________________________________________________________
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________________________________________________________________
________________________________________________________________

HOW WELL DO YOU SWIM?
○ POOR
○ FAIR
○ STRONG

HOW OFTEN DO YOU SWIM?
○ ONCE A MONTH OF LESS
○ THREE TO FIVE TIMES A MONTH
○ MORE THAN 5 TIMES A MONTH

WERE YOU A MEMBER OF THE JROTC, CIVIL AIR PATROL (CAP) OR SEA CADETS?
○ YES
    IF YES, GIVE COMPLETE DESCRIPTION OF LEADERSHIP POSITONS HELD IN REMARKS SECTION.
      ○ JROTC Service________________
      ○ CAP
○ Sea Cadets
  Number of Years________________
○ NO

REMARKS:
________________________________________________________________
________________________________________________________________
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NON-ATHLETIC ACTIVITIES
IDENTIFY THOSE NON-ATHLETIC ACTIVITIES AND ANY RECOGNITION RECEIVED FOR YOUR PARTICIPATION; INCLUDE ACTIVITIES IN HIGH SCHOOL, COLLEGE OR IN THE COMMUNITY.
________________________________________________________________
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VOLUNTEER ACTIVITIES
DESCRIBE ANY VOLUNTEER ACTIVITIES YOU HAVE BEEN INVOLVED IN AND ANY RECOGNITION RECEIVED FOR YOUR PARTICIPATION; INCLUDE TOTAL VOLUNTEER HOURS PER YEAR.

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WORK HISTORY
LIST YOUR RECENT WORK EXPERIENCE INDICATE THE NUMBER OF HOURS WORKED EACH WEEK, THE TYPE OF WORK YOU WERE PERFORMING AND RESPONSIBILITIES ASSOCIATED WITH YOUR POSITION.

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AWARDS AND HONORS
LIST ANY ACADEMIC, CITIZENSHIP OR ATHLETIC AWARDS OR HONORS YOU MAY HAVE RECEIVED FROM 9TH GRADE UNTIL NOW. PLEASE PROVIDE DETAILS OF THE TYPE AND NATURE OF THE AWARD OR HONOR.
PERSONNEL STATEMENTS COMPOSE YOUR OWN RESPONSES.
DISCUSS YOUR REASONS FOR WANTING TO BECOME A NAVAL OFFICER.
SPECIFICALLY COMMENT ON LEADERSHIP POSITIONS YOU’VE HELD, THE
CHALLENGES YOU HAVE FACED AND THE LESSONS YOU HAVE LEARNED.

WHAT DO YOU DO TO MAINTAIN OR IMPROVE YOUR PHYSICAL FITNESS?
DURING A TYPICAL SCHOOL WEEK HOW MANY HOURS DO YOU SPEND:

AT SCHOOL______________

DOING HOMEWORK__________

ENGAGED IN ATHLETIC TEAM ACTIVITIES_____________

ENGAGED IN EXTRA-CURRICULAR ACTIVITIES (CLUBS) _______

ENGAGED IN VOLUNTEER ACTIVITIES_____________

OTHER (EXPLAIN)

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

IF NOT APPLYING FOR A NURSE OPTION SCHOLARSHIP, WHAT ARE YOUR TOP 3 UNRESTRICTED LINE COMMUNITIES YOU WISH TO COMMISSION INTO AND WHY? IF NOT SELECTED FOR THESE COMMUNITIES, WOULD YOU ACCEPT YOUR COMMISSION?

_____ SURFACE WARFARE

_____ NAVAL AVIATOR (PILOT)

_____ NAVAL FLIGHT OFFICER (AVIATOR)

_____ SUBMARINE OFFICER

_____ EXPLOSIVE ORDNANCE DISPOSAL OFFICER

_____ SPECIAL WARFARE OFFICER
I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

I HAVE NO CONVICTION OR BELIEFS WHICH WOULD PROHIBIT MY SERVING IN AN UNRESTRICTED MILITARY STATUS.

PRINT YOUR FULL NAME EXACTLY AS IT IS SHOW ON YOUR BIRTH CERTIFICATE OR AS SHOWN ON ANY OFFICIAL DOCUMENT WHICH CHANGES YOUR NAME

APPLICANTS PRINTED NAME ________________________________________________________________

APPLICANTS SIGNATURE _________________________________________________________________

DATE _________________________________