

# CADET APPLICATION AND ENROLLMENT RECORD

For use of this form, see CC Pam 145-4, the proponent agency is ATCC-PC

## DATA REQUIRED BY THE PRIVACY ACT OF 1974

**Authority** 10 USC 2101, 2103, 2104, 2107, 2111, and 5 USC 301  
**Principal Purpose(s)** To obtain personnel data in order to determine eligibility for enrollment and serve as a source document for cadet's service record throughout participation in the ROTC Program. Provides data for the administration of the ROTC student commencing with application for enrollment into the ROTC Program.  
**Routine Uses** To verify eligibility to participate in the ROTC Program; to provide information on addresses and telephone numbers for use in the event of death, injury, illness or unauthorized absence while participating in ROTC activities; to facilitate contact with a cadet during other than normal training periods; to make a matter of record the information provided by the cadet  
**Disclosure** Disclosure is voluntary. However, failure to provide complete information and provide responses will suspend the enrollment process into the ROTC Program

### PART I - GENERAL INFORMATION

Last Name	First Name	Initial		
1. NAME	<input type="text"/>	<input type="text"/>	2. SSN <input type="text"/>	3. COLLEGE ID # <input type="text"/>
4. EMAIL	<input type="text"/>			
5. LOCAL ADDRESS	<input type="text"/>	5a. CITY <input type="text"/>	5b. STATE <input type="text"/>	5c. ZIP CODE <input type="text"/>
6. PHONE NUM	<input type="text"/>			
7. PERMANENT ADDRESS	<input type="text"/>	7a. CITY <input type="text"/>	7b. STATE <input type="text"/>	7c. ZIP CODE <input type="text"/>
8. PH NUM	<input type="text"/>			
9. DOB <input type="text"/>	DDMMYY	10. POB <input type="text"/>	City <input type="text"/>	State <input type="text"/>
11. RELIGIOUS PREF	<input type="text"/>	12. BLOOD TYPE	<input type="text"/>	13. ACT <input type="text"/>
14. SAT	<input type="text"/>			
15. SEX <input type="text"/>	16. HEIGHT <input type="text"/>	17. WEIGHT <input type="text"/>	18. MARITAL STATUS <input type="text"/>	19. DEPENDENTS <input type="text"/>
19a. NUMBER OF DEPENDENTS	<input type="text"/>			
20. RACE/ETHNICITY (Check One)	<input type="checkbox"/> African American	<input type="checkbox"/> American Indian	<input type="checkbox"/> Asian	<input type="checkbox"/> Caucasian
	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Other <input type="text"/>		
21. CITIZENSHIP (Check One)	U.S. Citizen:	<input type="checkbox"/> U.S. Born	<input type="checkbox"/> Naturalized	<input type="checkbox"/> Born Overseas With U.S. Parents
	Non U.S. Citizen:	<input type="checkbox"/> Immigrant Alien	<input type="checkbox"/> Nonimmigrant Alien	<input type="checkbox"/> Refugee
22. Do you have any condition that could interfere with you participating in a normal college physical education course?	<input type="checkbox"/>	22a. If "yes" explain	<input type="text"/>	
23. Have you ever received Medical Disability payments from any source?	<input type="checkbox"/> N	23a. If "yes" explain	<input type="text"/>	
24. NEXT OF KIN	<input type="text"/>	24a. ADDRESS	<input type="text"/>	24b. PHONE NO <input type="text"/>

### PART II - ACADEMIC INFORMATION

25. ROTC HOST SCHOOL	<input type="text"/> Southern IL University @ Carbondale	25a. FICE CODE	<input type="text"/> 001758	26. SCHOOL OF ATTENDANCE	<input type="text"/> Southern IL University @ Carbondale	26a. FICE CODE	<input type="text"/> 001758
27. RESIDENCY STATUS	<input type="text"/> R	28. ACADEMIC CLASS	<input type="text"/>	29. PROJECTED GRADUATION DATE	<input type="text"/>	30. ACADEMIC MAJOR	<input type="text"/>
31. ACADEMIC MINOR	<input type="text"/>	32. CREDITS TOWARD DEGREE	<input type="text"/>	33. CREDITS REQUIRED FOR DEGREE	<input type="text"/>	34. CGPA (COLLEGE)	<input type="text"/>
35. OTHER COLLEGES ATTENDED	<input type="text"/>	35a. YEAR(S) ATTENDED	<input type="text"/>	36. HIGH SCHOOL ATTENDED	<input type="text"/>		
36a. GRADUATION DATE	<input type="text"/>	37. ROTC SCHOLARSHIP RECIPIENT	<input type="text"/>	37a. If "yes" what type?	<input type="text"/>		
38. OTHER SCHOLARSHIPS	<input type="text"/>	39. JROTC EXPERIENCE	<input type="text"/>				

### PART III - CURRENT OR PRIOR MILITARY SERVICE (TO INCLUDE OFFICER PRODUCING PROGRAMS)

<input type="checkbox"/> NOT APPLICABLE (Go to PART IV)	40. CURRENT SERVICE: Are you currently in the Armed Forces?	<input type="checkbox"/> Y	40a. If "yes" which Branch?	<input type="text"/>	
40b. SMP UNIT	<input type="text"/>	40c. Is your spouse currently a member of the Armed Forces?	<input type="checkbox"/> N		
41. PRIOR SERVICE: Have you ever been enrolled in an officer producing program?	<input type="checkbox"/> N	41a. Were you ever disenrolled from the ROTC Program?	<input type="checkbox"/> N		
41b. Were you ever enrolled in a Service Academy?	<input type="checkbox"/> N	41c. Were you ever discharged from the Armed Forces?	<input type="text"/>	41d. If "yes" what type of discharge?	<input type="text"/>
		41e. If "yes" what was the RE Code?	<input type="text"/>		
41f. Months of Active Service	<input type="text"/>	41g. Have you ever been discharged for medical reasons?	<input type="checkbox"/> N	41 h. If "yes", explain:	<input type="text"/>