

STATE OCS APPLICATION PACKET SUPPORT FORM

PRIVACY ACT STATEMENT

AUTHORITY: Sections 510 and 511, Title 10, U.S. Code; Sections 301 and 304, Title 32, U.S. Code; and Executive Order 9397 (Privacy Act of 1974, Section 7[b]). PRINCIPAL PURPOSE: To request enrollment in the Oklahoma Army National Guard Officer Candidate Program. ROUTINE USES: To assist in completing the administrative requirements for entrance into the Oklahoma Army National Guard Officer Candidate Program. DISCLOSURE: Disclosure is mandatory. Individual could be denied enrollment in the Oklahoma Army National Guard Officer Candidate Program if not completed.

Instructions: If the item is included in the packet, note with an "X". If the item has been requested, note with an "R" and give status in the REMARKS column. Include supporting documentation for requested items. If the item does not apply to you, use "N/A". The information entered on this form is for official use only and will be kept in confidence. ALL PAGES OF THIS FORM MUST BE COMPLETED.

1. Last Name—First Name—Middle Name

2. Last 4 of SSN

3.	ITEM (see reverse for detailed instructions)	STATUS	REMARKS
1	OKARNG Form 45-E		
	- Forms available at http://ok.ng.mil/pages/officer-forms.aspx		
2	Certified Copy of Birth Certificate		
3	- Must Commission Prior to Age 42		
4	- Proof of Naturalization, if not a U.S. Citizen by Birth		
5	Copy of Social Security Card		
6	Official College Transcripts		
7	ASVAB GT Score Verification		
8	Enlisted Record Brief (ERB)		
9	DD Form 93 (Record of Emergency Data)		
10	DD Form 214 (Prior Military Service)		
11	DD Form 369 (Police Record Check)		
12	- Waiver for Civil Conviction, if Required		
13	DA Form 705 (APFT Scorecard)		
14	DA Form 5500-R or 5501-R, if Required		
15	DA Form 4836 (Extension of Enlistment), if Required		
16	DA Form 3645, 3645-1 (Equip. & Clothing Record)		
17	e-QIP Security Clearance Input Verification or SF 312		
18	PHA (Periodic Health Assessment)		
19	DD 2807-2 & USMEPCOM 680-3A-E		
20	NGB Form 62E (Draft) fill out pages 1-3 ONLY		
21	Candidate Autobiography		
22	Commander's Letter of Recommendation		

STATE OCS APPLICATION PACKET SUPPORT FORM (CONTINUED)

24. Applicant Last Name—First Name—Middle Name

25. Last 4 of SSN

26. Medical Information (Physical Exam)

●Color Blind? YES NO

●On your PHA, what are your PULHES?

P	U	L	H	E	S

●Based on the PULHES, are you medically qualified for commissioning? YES NO

27. Education Information

●What is your GT Score? _____

●Do you possess a Baccalaureate degree? YES NO

If "NO"

- Number of college semester hours you currently have: _____ What is your anticipated graduation date? _____

●Do you wish to be considered for Accelerated OCS? YES NO

If "YES"

- List your top three officer branch preferences: 1. _____ 2. _____ 3. _____

Detailed Instructions for Items Listed in Block 3

Item 2: Proof of U.S. citizenship is a raised-seal birth certificate. Present the birth certificate to a commissioned officer or your unit personnel NCO for photocopying. Type "I certify this to be a true copy" on the photocopy and have the officer or NCO sign and date it.

Item 3: Age Waiver not authorized.

Item 4: Refer to Figure 3-1, NGR 600-100 for acceptable proof.

Item 5: Must be current to reflect any name changes due to marriage or other reasons. Use Form SS-5 to apply for a new card, if required.

Item 6: Must have a minimum of 90 college credit hours from an accredited institution to be accepted into OCS.

Item 7: Minimum GT score of 110 is required.

Item 8: Review for accuracy and up-to-date information.

Item 9: Review for accuracy and up-to-date information.

Item 10: Must have completed Basic Training and AIT. Soldiers enlisted under the OCS option must only have completed Basic Training.

Item 11: Must be dated within 30 days of OCS Application Packet submission date.

Item 12: Contact the Officer Strength Manager (OSM) for guidance on submitting a Civil Conviction Waiver request.

Item 13: Must be dated within 30 days of OCS Application Packet submission date.

Item 14: Required if most recent weight block on DA Form 705 is marked "NO-GO".

Item 15: Provide most recent copy. Your current enlistment must extend beyond your OCS class graduation date.

Item 16: Must show complete issue of all clothing and equipment required to attend OCS.

Item 17: You must have a security clearance level of "SECRET" based upon a NACLC investigation to be commissioned.

"SECRET" clearances based on an ENTNAC investigation do not qualify for commissioning purposes. Applicants who already have a "SECRET" clearance must provide a SF 312. Applicants without a "SECRET" clearance must coordinate with their unit to submit an application through e-QIP and provide a copy of e-QIP input verification email.

Item 18: A PHA must be included if Chapter 2 physical is more than 1 year old by Phase 1 OCS start date.

Item 19: The DD 2807-2 is the Chapter 2 Prescreen and the USMEPCOM 680-3A-E is the Request for Examination.

Item 20: NGB Form 62E, fill out pages 1 thru 3 ONLY.

Item 21: Contact the OSM for example and detailed instructions.

Item 22: Applicant's commander must write a Letter of Recommendation attesting to the Soldier's suitability for the OCS program and leadership potential.

STATE OCS APPLICATION PACKET SUPPORT FORM (CONTINUED)

20. Applicant Last Name—First Name—Middle Name

21. Last 4 of SSN

22. Unit Commander Approval

UPON INTERVIEW, I FIND THIS SOLDIER ELIGIBLE FOR THE OKARNG OCS PROGRAM. I HAVE REVIEWED THIS SOLDIER'S APPLICATION PACKET AND CERTIFY THAT IT IS COMPLETE. I RECOMMEND THIS SOLDIER BE ACCEPTED INTO THE OKARNG OCS.

Additional Comments:

23. Unit Commander Typed Name

24. Unit Commander Signature

25. Date Signed

26. Battalion Commander Approval

I HAVE REVIEWED THIS APPLICATION PACKET AND RECOMMEND THIS SOLDIER BE ACCEPTED INTO THE OKARNG OCS.

Additional Comments:

27. Battalion Commander Typed Name

28. Battalion Commander Signature

29. Date Signed

30. MACOM Commander Approval

I HAVE REVIEWED THIS APPLICATION PACKET AND RECOMMEND THIS SOLDIER BE ACCEPTED INTO THE OKARNG OCS.

Additional Comments:

31. MACOM Commander Typed Name

32. MACOM Commander Signature

33. Date Signed