



**U.S. MARINE CORPS FORCES SPECIAL OPERATIONS COMMAND (MARSOC)
COMMANDING OFFICER'S SCREENING CHECKLIST
CRITICAL SKILLS OPERATOR (CSO) /
OPERATIONAL FORCES BRAVO (OFB)**

APPLICATION INSTRUCTION SHEET

NOTE: Be sure to read each section carefully to ensure the accuracy and completeness of this checklist.

PERSONAL DATA: Fill in all boxes pertaining to personal data. Do not leave any boxes unmarked or any answers unanswered. If the data does not apply then indicate by marking "N/A" in the appropriate box. *Include area code for unit DSN phone number. If you have questions, please contact a recruiter because incomplete documents will only delay the application process.

ASSESSMENT & SELECTION (A&S) AVAILABILITY: Unit leaders, based on your unit's operational tempo, please recommend/select the best time for your Marine to attend Assessment & Selection Preparatory & Orientation Course (ASPOC) and Assessment & Selection (A&S).

PREREQUISITE/REQUIREMENTS/QUALIFIED: Read carefully each *PREREQUISITE* then assess each of the *REQUIREMENTS* as it relates to the applicant. In the *QUALIFIED* column mark "YES" if the prerequisite is met, or mark "NO" if the prerequisite is not met.

REQUIRED SIGNATURES: Battalion/Squadron Sergeant Major (Enlisted only) **and** Battalion/Squadron Commanding Officer (Officer/Enlisted)

NOTE TO SENIOR LEADERSHIP:

- Your signature on this checklist represents the validation and accuracy of all entries as well as the willingness to allow the applicant the opportunity to attend ASPOC (21 days) mandatory all, and A&S in a temporary assigned duty (TAD) status for approximately three weeks. Enlisted applicants who are selected from A&S will be slated for the next available Individual Training Course (ITC).
- **Any disqualifying mark does not discontinue the administrative process of the application or necessarily mean that the applicant will not be approved for A&S. MARSOC Recruiting and Screening Branch is the final authority as to the qualification status of the applicant.**
- To sign off on the Medical/Dental prerequisite box on this checklist the Marine must be in a "Fit for Full Duty (FFD)" status. The Marine must have a current Period Health Assessment (PHA) in his medical record. The Naval Special Warfare/ Special Operations (NSW/SO) exam is **NOT required for Command signature on the CSO checklist**, however, the Marine **MUST have a current NSW/SO exam in his medical record PRIOR to reporting in for ASPOC.**
- Upon selection of A&S, enlisted Marines will return to their command to await Permanent Change of Station (PCS)/Permanent Change of Assignment (PCA) orders to MARSOC upon Reenlistment-Extension-Lateral Move (RELM) into MOS 0372 (Critical Skills Operator) from Manpower Management Enlisted Assignments (MMEA), Headquarters U.S. Marine Corps (HQMC). MMEA, HQMC is the final authority regarding issuance of PCS/PCA orders upon completion of A&S and RELM 0372 MOS approval.
- Officer applicants who are selected at A&S will be assigned PCS/PCA DUINS orders upon MMOA approval.
- Commands are encouraged to utilize the MARSOC Command Website for further guidance on the application process. Further questions should be directed to the applicant's respective recruiter and/or unit Career Planner (CARPLAN). Unit CARPLAN should assist applicants in the administrative process of completing & verifying the required checklist(s) data entries prior to submitting to the Battalion/Squadron Sergeant Major & Commanding Officer. Return all fully completed and signed documents to the appropriate MARSOC Recruiting & Screening office by either scanning & emailing as attachments or via fax.

ADDITIONAL REQUIRED DOCUMENTS:

- Marine Corps Total Force System (MCTFS) Pages: Basic Individual Record (BIR), Basic Training Record (BTR), Record of Service (ROS), Legal Report (D119), and Education Page.
- Service Record Book (SRB) Standard Pages, even if blank: NAVMC 10132 (Unit Punishment Book), NAVMC 118(11) (Administrative Remarks), and NAVMC 118(13) (Record of Conviction by Court-martial).
- MARSOC Financial Worksheet.
- MARSOC Clearance Screening Questionnaire with adjudicated eligibility of SECRET in JPAS or command NACLIC with date.
- MARSOC Medical Screening Form **and** Naval Special Warfare/Special Operations (NSW/SO) Duty Medical Examination must be complete prior to attendance at ASPOC.

OFFICER APPLICANTS:

- Officer applicants will submit an application prior to an officer board which will convene approximately two months prior to the A&S class to which the officer is applying. Regardless, it is advisable that the officer submit the application well in advance of this timeframe in order to ensure all documents are received, complete, and any timing issues are immediately resolved. Timing with respect to PCS/PCA eligibility, Time in Grade (TIG), Date Current Tour Began (DCTB), Time on Station (TOS), augmentation/career designation, and limited A&S officer slots means the process is highly competitive and these issues must be discussed with either coast's OIC well in advance.
- The following additional documents are required:
 - Advance approval from officer's monitor via email (template available from either coast's OIC)
 - Last two observed NAVMC 10835 (USMC Fitness Report)
 - Marine Officer Summary (available from either coast's OIC)
 - Autobiography (2 pages maximum, addressed to "Officer-in-Charge, Recruiting & Screening Team East/West (as applicable)")
 - Master Brief sheet (MBS) (version of which includes last two observed USMC Fitness Reports)
 - Official Photo (taken within 12 months of application submission)

Toll Free Number: 1-888-93-MARSOC (627762)

www.marsoc.marines.mil

MARSOC Recruiting & Screening Team E (including Okinawa)
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FAX: (910) 451-3760
MARSOC_recruiting@usmc.mil

MARSOC Recruiting & Screening Team W (including Hawaii)
Ste 1109, Bldg 4100377
Camp Las Flores
Camp Pendleton, CA 92055
(760) 763-5101/5102/7778/8840 (DSN 365)
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MARSOC COMMANDING OFFICER'S SCREENING CHECKLIST CSO/OFB

PRIVACY ACT STATEMENT

In accordance with the Privacy Act of 1974, 5 U.S.C. § 552a (2006), this notice informs you of the purpose for collection of information on this form. Accordingly, please read the notice before completing any forms.

AUTHORITY: 10 U.S.C. § 5041, Headquarters U.S. Marine Corps, and E.O. 9397 (SSN).

PRINCIPAL PURPOSE: Information collected by this form will be used to screen Marines for MARSOC Critical Skills Operator/Operational Forces Bravo (CSO/OFB) Billets and submit requests for Reenlistment-Lateral Move (RELM) 0372 MOS of CSO to Manpower Management Enlisted Assignments (MMEA), Headquarters U.S. Marine Corps (HQMC).

RETENTION: The collected information will be maintained by MARSOC Recruiting and Screening Branch with limited access. Records in this file system will only be retrieved by Recruiting and Screening Personnel, Marine Special Operations School personnel, or designated personnel within MARSOC that have a need to know the information contained therein in order to further your application. This information will be deleted or destroyed when no longer needed.

ROUTINE USES: None other than the blanket routine uses established by the Department of Defense (DoD) Privacy Policy Office and posted at <http://www.defenselink.mil/privacy/notices/blanket-uses.html>.

DISCLOSURE: Providing information on this form is voluntary. However, failure to provide the information required herein may result in you not being successfully screened & assigned to Assessment and Selection (A&S) or being reviewed for Reenlistment-Extension-Lateral Move (RELM) 0372 MOS of Critical Skills Operator (CSO).



MARSOC COMMANDING OFFICER'S SCREENING CHECKLIST CSO/OFB

Last		First	MI
SSN	- -	EPDIP	
Rank		MOS	A&S Availability (mo/yr) Forecasted ITC Class
Phone	() -	E-Mail (.Mil or Civilian)	
Unit		Unit Phone () -	

Assessment & Selection (A&S) Availability Command: Based on your unit's operational tempo, please recommend/select the best time for your Marine to attend Assessment & Selection (A&S) Preparatory & Orientation Course (ASPOC) and A&S. ASPOC is 21 days and A&S is approximately three (3) weeks in length.

FALL	WINTER	SPRING
August/September	January/ February	April/ May

All applicants: Screening Checklist must be completed by the applicant's Chain of Command, to include a Command Endorsement (page 3 of this checklist). Applicants will also attach a copy of their Marine Corps Total Force System (MCTFS) Basic Individual Record (BIR), Basic Training Record (BTR), Record Of Service (ROS), Legal Report (D119), and Education Page. Also, include the following pages from applicant's Service Record Book (SRB)/Officer Qualification Record (OQR), even if blank: NAVMC 10132 (Unit Punishment Book), NAVMC 118(11) (Administrative Remarks), and NAVMC 118(13) (Record of Conviction by Court-martial). The completed checklist with all supporting documentation will be forwarded to applicant's respective recruiter.

Officer applicants: In addition to the above documents, officer applicants must also submit the following: Master Brief Sheet, last two observed of NAVMC 10835 (USMC Fitness Reports), Official Photo, Autobiography (no more than 2 pages), and Marine Officer Summary. Officer applicants may, but are not required to submit up to 3 letters of recommendation from former or current COs, OICs, RSOs, ROs, or similar billet holders who have sufficient observation to provide MARSOC with relevant information that bears on the assignment decision. The completed checklist with supporting documentation will be forwarded to the respective Recruiting & Screening Team OIC.

PREREQUISITE	REQUIREMENTS	QUALIFIED
Volunteer	Is the Marine a volunteer or has been directed by MMEA/MMOA. (You may mark more than one box)	VOLUNTEER <input type="checkbox"/> YES <input type="checkbox"/> NO DIRECTED <input type="checkbox"/> YES <input type="checkbox"/> NO
Citizenship	Is the Marine a U.S. Citizen, and if not, has the Marine applied for citizenship?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Rank: _____ DOR: _____	Corporal through Sergeant: Corporals must attend A&S and submit lateral move package prior to 5 years' time in service. Sergeants must have less than 1.5 years TIG upon checking into ITC and have less than 8 years' time in service at ECC. First Lieutenant: career designated; Captain no more than 1.5 years' time in grade.	<input type="checkbox"/> YES <input type="checkbox"/> NO
Pro/Con Marks: _____	Cpl - average marks in Service. (Minimum 4.3 / 4.3).	<input type="checkbox"/> YES <input type="checkbox"/> NO
Integrity, Maturity, and Judgment	Marine demonstrates integrity, maturity, and sound judgment. Can be trusted to act in an unsupervised capacity.	<input type="checkbox"/> YES <input type="checkbox"/> NO
GT Score: _____	105 or above.	<input type="checkbox"/> YES <input type="checkbox"/> NO
Courts-Martial	No courts-martial convictions.	<input type="checkbox"/> YES <input type="checkbox"/> NO
NJP	No NJP within the last 12 months or no more than 2 in current contract. No NJP as Officer.	<input type="checkbox"/> YES <input type="checkbox"/> NO
Page 11	No derogatory Page 11 entries within the last 12 months. Officers with derogatory Page 11 entries require a waiver.	<input type="checkbox"/> YES <input type="checkbox"/> NO
Drug Related Incidents	No incidents of drug abuse or possession.	<input type="checkbox"/> YES <input type="checkbox"/> NO
Alcohol Related Incidents	No alcohol-related incidents within 12 months or more than 2 in service.	<input type="checkbox"/> YES <input type="checkbox"/> NO
Adverse Fitness Report(s)	No adverse fitness reports within 12 months.	<input type="checkbox"/> YES <input type="checkbox"/> NO
Family Status Military spouse Number of Dependents: _____	This should be viewed as a precaution to avoid potential family hardships due to OPTEMPO. Verify Marine is not currently enrolled in a command-directed stress/anger management course or undergoing marital counseling. Special attention will be given to Marines who are separated or undergoing divorce proceedings who may be disqualified. Verify any legal proceedings and comment on status. Additional screening will be required for Marines who have active duty spouses and dependents in the Exceptional Family Member Program.	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO Is SNM enrolled in the EFMP <input type="checkbox"/> YES <input type="checkbox"/> NO



MARSOC COMMANDING OFFICER'S SCREENING CHECKLIST

CSO/OFB

(Continued)

PREREQUISITE	REQUIREMENTS	QUALIFIED
Medical and Dental qualified MARSOC Medical Screening Form completion date: _____	The Marine must be medically fit. Must have a current NSW/SO Duty Medical Examination (U.S. Navy NAVMED P-117, Manual of the Medical Department, Chap. 15, sec. 32-61, 102, 105, and 136) recorded in medical record. (Medical record will be screened upon check-in to ASPOC/A&S). Any medical documentation indicating problems with stress or psychological dysfunction is not necessarily a disqualifying factor but must be identified. Complete attached medical screening form. Medical Physician stamp or initials required. Contact MARSOC Recruiting Medical Liaison for inquiries or to aid in facilitating the medical screening process at (910) 451-3123.	<input type="checkbox"/> YES <input type="checkbox"/> NO
Current PFT Date: _____ Score: _____	Must possess a minimum PFT score of 225. A First Class PFT score must be recorded in MCTFS or have a current PFT roster signed by an official PFT proctor. At a minimum, the PFT score must be within the last 12 months. <u>CLASS 9</u> PFT will NOT be accepted	<input type="checkbox"/> YES <input type="checkbox"/> NO
Financially Responsible	Marine has demonstrated an ability to manage personal financial affairs with maturity and judgment. Does not exhibit a pattern of indebtedness or frequently write checks without sufficient funds. Complete attached financial worksheet. Net funds available is \$500.00	<input type="checkbox"/> YES <input type="checkbox"/> NO
Meets Minimum Obligated Service EAS: _____	Marine must have a minimum of 3 months remaining on current contract or by extension to participate in the scheduled A&S and, if selected , be willing to submit a Reenlist/Extension Lateral Move (RELM) package to meet 60 months of obligated service. This may require an ECFC Waiver. Officers must be willing to execute 48 month obligated assignment tour upon completion of Individual Training Course (ITC).	<input type="checkbox"/> YES <input type="checkbox"/> NO
Meets Personal Appearance and Height and Weight Standards Height: _____ Weight: _____ Body Fat %: _____	Marine is within the Marine Corps height and weight standards, per MCO 6110.3_ (Marine Corps Body Composition & Military Appearance Program). No unresolved history of assignment to body composition or personal appearance programs is authorized.	<input type="checkbox"/> YES <input type="checkbox"/> NO
Security Clearance Level: _____	Marine must have an adjudicated eligibility Secret in JPAS or command NACLCL submitted date. Any disqualifying attributes must be annotated in comments section of MARSOC Security Clearance Screening Form.	<input type="checkbox"/> YES <input type="checkbox"/> NO
Swim Qual Class: _____ Requal Date: _____	Demonstrate at A&S the ability to properly conduct abandon ship drill 6 m platform, 300 m swim (breast or side stroke) in utilities, tread water for 10 min while in utilities, & transition to survival float using blouse or trousers for 5 min.	
Military Schools or Special Skills	Does the Marine possess any experience, cultural, language, or special skills that may considered him as an exceptional candidate for assignment to MARSOC? List school/skill levels below with qualifying dates, if applicable.	<input type="checkbox"/> YES <input type="checkbox"/> NO
SCHOOLS/SPECIAL SKILLS NOT LISTED IN BTR		DATE:



MARSOC FINANCIAL WORKSHEET INSTRUCTIONS

The purpose of the MARSOC Financial Worksheet is to determine an applicant's financial stability, and therefore accuracy is important. Questions should be addressed to the applicant's respective recruiter. If a block does not apply to the applicant, enter "N/A". If the applicant has debt, expenses, or income to report that is not identified by any of the standard blocks on the Worksheet, utilize the "Other (specify)" block(s), and in block 18 ("Remarks"), first identify the block to which you are providing a corresponding explanation and then briefly explain the circumstances.

Block 1. Rank & Name. Enter the applicant's rank and full name.

Block 2. # of Dependents. Enter the total number of dependents for which the applicant is financially responsible.

Block 3. Date. Enter the date the MARSOC Financial Worksheet was completed.

Block 4. Unit. Enter the unit to which the applicant is currently assigned.

Block 5. Applicant's Gross Monthly Income. Enter the applicant's total gross monthly income before any monthly mandatory deductions or expenditures.

Block 6. Spouse's Current Employment. All single applicants or married applicants who do not want their spouse's income considered will enter "N/A". Married applicants who want their spouse's income considered in their application will enter the spouse's current employer's name.

Block 7. Spouse's Gross Monthly Income. All single applicants or married applicants who do not want their spouse's income considered will enter "N/A". Married applicants who want their spouse's income considered in their application will enter their spouse's gross monthly income before any monthly mandatory deductions or expenditures.

Block 8. Housing. Enter the applicant's housing status by marking an "X" as applicable: "Own" (block 8a), "Rent" (block 8b), "Other" (block 8c). If more than one apply, enter as applicable. If the applicant's housing status is "Other", or if you own and/or occupy more than one home (*e.g.*, own one, rent the other out, etc.), provide a brief explanation in block 18 ("Remarks").

Block 9. Total Bank Account Balances. Enter the total of all of the applicant's bank and checking account balances that are to be considered in the application, whether held jointly or individually.

Block 10. Total Investment Account Balances. Enter the total of all of the applicant's investment account balances, to include Thrift Savings Plan (TSP), Traditional or Roth Individual Retirement Account (IRA), 401k or similar plan, and cash value of whole life insurance, whether held jointly or individually.

Block 11. Outstanding Debt Balances. This section compares the applicant's total outstanding debt balances against his existing total bank and investment account balances as well as his total monthly and annual net income. Enter the applicant's total balance owed for all mortgages (block 11a), student loans (block 11b), credit cards (block 11c), medical bills (block 11d), auto loans (block 11e), and if applicable, "Other" debt (11f) with corresponding explanation in block 18 ("Remarks") for which the applicant is financially responsible.

Income / Mandatory Deductions / Expenditures. This section compares the applicant's total monthly income against his total mandatory monthly deductions and monthly expenditures.

Block 12. Monthly Income. Enter blocks 12a through 12d as they are reflected in the applicant's monthly Leave and Earnings Statement (LES). If the applicant has any other income that is to be considered in the application, enter it in block 12e with corresponding explanation in "Remarks" block (*e.g.*, net rental income, stock dividends, net capital gains, etc.).

Block 13. Mandatory Monthly Deductions. All single applicants or married applicants who do not want their spouse's income considered in their application, enter only the applicant's mandatory monthly deductions as reflected in the applicant's monthly LES. If the applicant has any other mandatory monthly deductions that are not reflected in his LES, enter them in the corresponding blocks (*i.e.*, 13f through 13j). For all other deductions, enter that total in block 13h (Allotments) and provide a corresponding explanation in block 18 ("Remarks"). For married applicants who want their spouse's income considered in their application, add the spouse's mandatory monthly deductions to the applicant's and include both amounts in blocks 13a through 13j.

Block 14. Monthly Expenditures. Enter all of the applicant's monthly expenditures. If the applicant is including his spouse's income for consideration, include her expenses as well. For items that are not indicated, use one of the "Other" blocks and provide a corresponding explanation in block 18 (Remarks).

Block 15. Total Monthly Gross Income. Add blocks 5 and blocks 7 and enter the amount.

Block 16. Total Monthly Mandatory Deductions & Expenditures. Add blocks 13k and 14r and enter the amount.

Block 17. Total Monthly Net Income. Subtract block 16 from block 15 and enter the amount.

Block 18. Applicant Remarks. As applicable, the applicant will enter block numbers and corresponding explanation to all "Other (specify)" blocks in which he enters an amount. MARSOC Recruiting will inform the applicant if any other items need explanation.

Block 19. Applicant Signature and Date. Applicant will sign and date.

Block 20. Qualified / Unqualified. As applicable, applicant's recruiter will circle QUALIFIED / UNQUALIFIED.

Block 21. MARSOC Recruiting Remarks. As needed, applicant's recruiter will provide amplifying remarks.

Block 22. Recruiter's Rank, Name, Signature, and Date. Applicant's recruiter will print rank and name, sign, and date.

MARSOC FINANCIAL WORKSHEET						
1. Rank & Name (Last, First, Middle)			2. # of Dependents		3. Date Completed	
4. Unit			5. Applicant's Gross Monthly Income			
6. Spouse's Current Employment			7. Spouse's Gross Monthly Income			
8. Housing	a. Own	b. Rent	c. Other	9. Total Bank Account Balances		10. Total Investment Account Balances
Check One						
11. OUTSTANDING DEBT BALANCES						
Item		Total Balance Owed		Item		Total Balance Owed
a. Mortgage				f. Other (specify)		
b. Student Loans				g. Other (specify)		
c. Credit Cards				h. Other (specify)		
d. Medical Bills				i. Other (specify)		
e. Auto Loans				j. Other (specify)		
11k. TOTAL						
INCOME / MANDATORY DEDUCTIONS / EXPENDITURES						
12. Applicant's Monthly Income			14. Monthly Expenditures			
a. Base Pay				a. Mortgages/rents		
b. BAS				b. Car Payments		
c. BAH				c. Auto Insurance		
d. SDA				d. Personal Life Insurance		
e. Other (specify)				e. Investments		
12f. TOTAL				f. Credit Cards		
13. Mandatory Monthly Deductions			g. Student Loans			
a. FITW				h. Personal Loans		
b. Social Security				i. Medical Bills		
c. Medicare				j. Food		
d. SITW				k. Utilities		
e. SGLI				l. Transportation Costs		
f. Family dental				m. Other (specify)		
g. Charity				n. Other (specify)		
h. Allotments (specify)				o. Other (specify)		
i. Advance Pay				p. Other (specify)		
j. Child Support/Alimony				q. Other (specify)		
13k. TOTAL			14r. TOTAL			
15. TOTAL MONTHLY GROSS INCOME (add blocks 5 & 7)			16. TOTAL MONTHLY MANDATORY DEDUCTIONS & EXPENDITURES (add blocks 13k and 14r)		17. TOTAL MONTHLY NET INCOME (subtract block 16 from block 15)	
18. Applicant's Remarks						
19. Applicant's Signature and Date						
20. Qualified/Unqualified. Based on my assessment, I find the Marine financially QUALIFIED / UNQUALIFIED. The finding of UNQUALIFIED is amplified in the remarks below.						
21. MARSOC Recruiting Remarks						
22. Recruiter's Rank, Name, Signature, and Date						



MARSOC CLEARANCE SCREENING QUESTIONNAIRE INSTRUCTIONS

IMPORTANT: This questionnaire is to be filled out in the presence of the local Security Manager or Assistant Security Manager only.

- Answer all questions. Any question not answered will result in an incomplete questionnaire which will cause a delay in the processing of the applicant file and may also be grounds for disqualification.
- Any “yes” response to questions 2 through 12 below require an explanation in the “Remarks” portion of this questionnaire identifying the number to which the response applies. This will not necessarily be a disqualifying factor in obtaining a clearance, or cause for non-assignment to Assessment and Selection.
- If submission of the document will be in digital format as an attachment on an e-mail, then the local Security Manager or Assistant Security Managers typed name in the appropriate signature blocks will be acceptable. Otherwise, a standard signature is required.
- Be sure to forward all questions to the MARSOC Recruiting & Screening Team via phone call or email:

Toll Free Number: 1-888-93-MARSOC (627762) · www.marsoc.marines.mil

MARSOC Recruiting & Screening Team E (including Okinawa)
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FAX: (760) 763-7779
MARSOC_recruiting_we@usmc.mil



MARSOC CLEARANCE SCREENING QUESTIONNAIRE

The purpose of this questionnaire is to assess and establish your eligibility to obtain a security clearance. Any assignment to MARSOC will potentially expose you to classified materials. This questionnaire is an inquiry into your loyalty, character, trustworthiness and reliability for an appointment to a sensitive position or position of trust.

1. **PRELIMINARY**

Do you understand the reasons for, and the importance of, this interview?

YES NO

2. **ALLEGIANCE TO THE UNITED STATES**

Have you ever had any involvement in any act of sabotage, espionage, treason, terrorism, sedition, or other act whose aim is to overthrow the U.S. Government or alter the form of government by unconstitutional means? (If "yes", provide explanation in "Remarks" section.)

YES NO

3. **FOREIGN INFLUENCE**

Is any member of your immediate family or any close friend not a U.S. Citizen? (If "yes", provide explanation in "Remarks" section.)

YES NO

4. **PERSONAL CONDUCT**

Has there ever been any unfavorable occasions concerning personal conduct, to include court-martial, non-judicial punishment, adverse page 11 entry, or traffic citation? (If "yes", provide explanation in "Remarks" section.)

YES NO

5. **SEXUAL BEHAVIOR**

Have you ever committed any sexual criminal offense? (If "yes", provide explanation in "Remarks" section.)

YES NO

6. **FINANCIAL CONSIDERATIONS**

Do you now, or have you ever had a history of indebtedness? (If "yes", provide explanation in "Remarks" section.)

YES NO

7. **ALCOHOL CONSUMPTION**

Have you ever been treated for alcoholism, alcohol abuse, or been charged with any alcohol related incidents? (If "yes", provide explanation in "Remarks" section.)

YES NO

8. **DRUG INVOLVEMENT**

Have you or any family member experimented in the use or sale of cannabis, opium, narcotic or any other dangerous drugs? (If "yes", provide explanation in "Remarks" section.)

YES NO

9. **CRIMINAL CONDUCT**

Have you been found guilty of criminal conduct involving any of the following (If "yes", provide explanation in "Remarks" section.):

- | | | |
|--|---------------------------|--------------------------|
| a. Force, coercion, or intimidation? | <input type="radio"/> YES | <input type="radio"/> NO |
| b. Firearms or explosives? | <input type="radio"/> YES | <input type="radio"/> NO |
| c. Dishonesty of false statements? | <input type="radio"/> YES | <input type="radio"/> NO |
| d. Obstruction or corruption of a government function? | <input type="radio"/> YES | <input type="radio"/> NO |
| e. Violence against persons or property? | <input type="radio"/> YES | <input type="radio"/> NO |

10. **SECURITY VIOLATIONS**

Have you intentionally disclosed classified material to unauthorized persons? (If "yes", provide explanation in "Remarks" section.)

YES NO

11. **OUTSIDE ACTIVITIES**

Are you, any of your immediate family, or close friends affiliated with any combination of persons that advocates the overthrow of the U.S. Government by any unconstitutional means? (If yes, provide explanation in "Remarks" section.)

YES NO

12. MISUSE OF INFORMATION TECHNOLOGY SYSTEMS

Have you failed to comply with any rules, guidelines, or regulations pertaining to protecting classified systems, networks, or information? (If yes, provide explanation in "Remarks" section)

YES NO

I HEREBY CERTIFY THAT I HAVE ANSWERED ALL QUESTIONS TO THE BEST OF MY KNOWLEDGE, AND HAVE NOT INTENTIONALLY PROVIDED ANY INCORRECT OR MISLEADING INFORMATION. I HAVE INITIALED SUBSEQUENT PAGES OF THE INTERVIEW TO CERTIFY THE ANSWERS AS MY OWN AND THAT THEY WERE MADE OF MY OWN FREE WILL.

REMARKS:

APPLICANT (PRINT NAME)

SIGNATURE

DATE

(UNIT SECURITY MANAGERS USE ONLY)

1. U.S. CITIZENSHIP VERIFIED:

YES NO

2. BASED ON INTERVIEW, IS THE APPLICANT RECOMMENDED FOR ACCESS TO CLASSIFIED MATERIALS?

YES NO

REMARKS:

Investigation Summary:

Agency: _____

Opened Date: _____ Closed Date: _____

Adjudication Summary:

Agency: _____

Opened Date: _____ Closed Date: _____

Determination: _____ Determination Date: _____

SNM currently has a _____ eligibility, which will expire on _____.

SECURITY MANAGER (PRINT NAME)

SIGNATURE

DATE



MARSOC MEDICAL SCREENING FORM

- 1. Purpose.** To ensure all candidates are medically qualified and cleared prior to reporting and commencing training.
- 2. Requirements.** Naval Special Warfare/Special Operations (NSW/SO) Duty Medical Examination physicals must be signed by an Undersea Medical Officer (UMO). The MARSOC Medical Screening Form **MUST** be included on top of Section II of the applicant's medical health record prior to reporting.

A&S Preparation & Orientation Course (ASPOC)/A&S Course:

To be completed prior to member being assigned to ASPOC/A&S (Medical Representative will initial each line once complete):

_____. NSW/SO Duty Medical Examination physical completed within 18 months, to include all waivers if indicated and signed by an Undersea Medical Officer (UMO). **NPQ for dive does not constitute disqualification for MARSOC.**

_____. Has a current Periodic Health Assessment (PHA) which will not expire upon the completion of A&S.

_____. All outstanding medical conditions have been reviewed and evaluated. Specialists have been consulted if applicable and the candidate has been placed on FIT FOR FULL DUTY (FFD) status for special operations training.

I, _____, am currently in **excellent** / **good** / **fair** / **poor** health and I am **willing** / **not willing** to participate in the A&S course. I have no medical issues at this time. I also understand that if this checklist is not completed I will not be able to participate in an A&S course.

Candidate: _____ ****Medical Representative:** _____
Signature / Print Name / Date Signature/Print Name/Date

Medical Representative POC:

Name: _____ Command: _____

Phone: (_____) _____--_____ Fax Number: (_____) _____--_____

E-mail: _____

**** POC ABOVE ATTESTS TO THE VERIFICATION OF A NSW/SO DUTY MEDICAL EXAMINATION PHYSICAL BEING COMPLETED PER THE BELOW REFERENCES ****

1. U.S. Navy NAVMED P-117, Manual of the Medical Department, Chap. 15, §§ 32-61, 102, 105, and 136.
2. Army Regulation 40-501, Standards of Medical Fitness, Chap. 5-8.
3. ACN to OPNAVINST 6400.1C, of SEP 2009.

Who can perform a NSW/SO Duty Medical Examination? The NSW/SO Duty Medical Examination physical may be performed by any physician. However, it must be reviewed for completeness and accuracy, and then countersigned by a UMO. Physician assistants, nurse practitioners, and independent duty corpsmen are not authorized to perform the exam.