NROTC PREPARATORY SCHOLARSHIP (NPS)
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.

Preferred submission method is via DOD-Safe: https://safe.apps.mil/
* A request code is required for submission.
* To obtain a request code, email NROTCPrep@regent.edu, or the University NROTC point of contact.

OR, mail your responses to: Director NROTC Preparatory Programs
Naval Service Training Command
1000 Regent University Drive
Virginia Beach, VA 23464-9800

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 receive a NROTC Scholarship Reservation. If you are selected, 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/74_8_9/Article/6411/n01131-1.aspx, and N0180-3 located at http://dpclo.defense.gov/Privacy/SORNsIndex/DODComponentArticleView/tabid/74_8_9/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 Preparatory Scholarship Reservations, 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.

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 Preparatory Scholarship 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) _________

PERMANENT ADDRESS (Street, City, State, Zip Code)
___________________________________
___________________________________
___________________________________

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 America, parents must 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?
- FLUENT - speak and understand virtually all types of conversations
- LIMITED - speak and/or understand most general conversations with little difficulty)
- ELEMENTARY - speak and/or understand basic greetings and memorized phrases

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

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/MIDSHIPMAN CANDIDATE 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 (OTHER THAN NPS)?
  o YES
  o NO

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

ARE YOU A FIRST GENERATION COLLEGE STUDENT?
  o YES
  o NO

NAMES, ADDRESSES, AND DATES OF ATTENDANCE OF HIGH SCHOOL(S) ATTENDED
(LIST MOST RECENT FIRST)

____________________________________________________________

____________________________________________________________

____________________________________________________________

____________________________________________________________

DATE OF GRADUATION (MM/YY) _____ / _____

GPA _______ CLASS RANK _______

SAT MATH______ EBRW______

ACT STEM______ ELA______ COMPOSITE______
NAME AND ADDRESS OF PREPARATORY COLLEGE ATTENDING:

_________________________________________________________________

_________________________________________________________________

DATE OF ENTRY (MM/YY) _______ / _______

INTENDED ACADEMIC MAJOR_________________________________________

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:________________________________________________________

_________________________________________________________________

_________________________________________________________________

WERE YOU A MEMBER OF THE JROTC, CIVIL AIR PATROL (CAP) OR SEA CADETS?

○ YES  (IF YES, GIVE A COMPLETE DISCRIPITION OF LEADERSHIP POSITION HELD IN REMARKS SECTION)

○ NO

○ JROTC  BRANCH OF SERVICE:________________________

○ CAP

○ SEA CADETS  NUMBER OF YEARS:_____________________

REMARKS:________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________
DESCRIBE ANY ADVERSITY(IES) YOU HAVE HAD TO OVERCOME.
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__________________________

Preferred submission method is via DOD-Safe: https://safe.apps.mil/
* A request code is required for submission.
* To obtain a request code, email NROTPreparegent.edu, or the
University NROTC point of contact.