

OFFICER CANDIDATE SCHOOL APPLICATION

1. NAME (Last, First, Middle)		2. GRADE	3. SSN	4. GENDER ___ MALE ___ FEMALE
5. ORGANIZATION (Include Address & Zip Code)			6. UNIT PHONE	
7. HOME OF RECORD (Street, City, State & Zip Code)			8. HOME PHONE	
9. EMPLOYER (Include Address & Zip Code)			10. EMPLOYER PHONE	
11. DOB / AGE ____ / ____	12. ARE YOU A U. S. CITIZEN: ___ YES ___ NO		IF NO, DATE OF CITIZENSHIP APPLICATION: _____	
13. WAIVER(S) REQUIRED: ___ YES ___ NO IF YES, ATTACH COPY (COPIES)	14. DO YOU HAVE A CHAPTER II PHYSICAL WITHIN SIX MONTHS OF CLASS START DATE: ___ YES ___ NO		15. DO YOU HAVE A "SECRET" CLEARANCE: ___ YES ___ NO IF NO, DATE REQUESTED: _____	
16. COLLEGE DEGREE: ___ YES ___ NO IF NO DEGREE, NUMBER OF COLLEGE CREDITS: _____		LEVEL OF DEGREE: ___ AA ___ AS ___ BA ___ BS TYPE OF CREDITS: _____ QUARTER (or) _____ SEMESTER		
NAME OF COLLEGE: (Include Address, City, State & Zip Code)		FRESHMAN _____ SOPHOMORE _____ JUNIOR _____ SENIOR _____	Complete if credits earned are less than 60 semester hours. SAT (850) MINIMUM _____ ACT (19) MINIMUM _____	
17. MILITARY BACKGROUND: PEBD: _____ PRIMARY MOS: _____ HIGHEST LEVEL OF MILITARY EDUCATION: _____ GT SCORE: (110 MINIMUM): _____		ETS DATE: (Must be 16 months from Class Start Date) _____ DATE OF MN ARNG ENLISTMENT: _____ TOTAL YEARS OF MILITARY SERVICE: _____		
18. LAST APFT SCORE: PU _____ SU _____ RUN _____ TOTAL: _____ DATE OF TEST: _____ LAST SEMI ANNUAL WEIGH-IN: HEIGHT IN INCHES _____ WEIGHT _____ DATE _____ PASSED SCREENING WEIGHT _____ YES _____ NO IF OVER SCREENING WEIGHT, PERCENT OF BODY FAT _____ % (Attach DA Form 5500 for Males, DA Form 5501 for Females.)				
19. WERE YOU EVER REJECTED FOR MILITARY SERVICE OR APPOINTMENT AS AN OFFICER? ___ YES ___ NO WERE YOU EVER COURT-MARTIALED? ___ YES ___ NO DID A CIVIL COURT FOR OTHER THAN MINOR TRAFFIC VIOLATIONS EVER CONVICT YOU? ___ YES ___ NO (If YES, attach statements of circumstances.)				
20. UNIT COMMANDER'S STATEMENT OF APPLICANT'S LEADERSHIP POTENTIAL: _____ _____ _____ _____ _____				
_____ SIGNATURE OF APPLICANT		_____ (DATE)	_____ SIGNATURE OF UNIT COMMANDER	
			_____ (DATE)	

RTI Form 351a, 1 August 1998 (LRA)
All previous editions of OCS Applications are SUPERSEDED.

