NAVAL RESERVE OFFICERS TRAINING CORPS
COLLEGE PROGRAM APPLICATION

OMB CONTROL NUMBER: 0703-0026
OMB EXPIRATION DATE: 01/30/2026

AGENCY DISCLOSURE NOTICE

The public reporting burden for this collection of information, OMB-0703-0026, is estimated to average 3 hours and 35 minutes 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 the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. 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 READ THE FOLLOWING STATEMENT REQUIRED BY THE PRIVACY ACT OF 1974 BEFORE COMPLETING THE APPLICATION.

AUTHORITY: The authority to request this information is contained in: 5 USC §301 (Authorizing Forms and Regulations); Executive Order 9397 (Use of Social Security Numbers).

PRINCIPAL PURPOSE(S): The information you provide will be used to determine whether you qualify, and should be nominated for, an NROTC College Program Scholarship. If you are nominated, 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 https://dpcld.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570316/n01131-1/.

ROUTINE USE(S): Information provided on the application will be used to screen and select individuals to received NROTC Scholarships, 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. Other uses may include providing the information to officials and employees of: The Department of Transportation; other agencies of the Executive Branch upon request in relation to the management of quality of military recruitment; and the Department of Veterans Affairs and Selective Service Administration in relation to enlistment or reenlistment eligibility. Information you provide in this application is protected by the Privacy Act and will not be released outside of the Department of Defense without your permission unless it comes with an exception to the Act or one of the routine uses in 32 C.F.R. § 701.112, https://www.navy.mil/privacy.asp, and the routine uses set forth there. If you are nominated for an NROTC Scholarship, the information will be released to the top five schools you indicated on your application. Your information and notification of status may also be provided to your high school so they may assist with the final stages of the process.

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 program.

More information on the SORNS can be found at the following link(s):
http://dpclo.defense.gov/Privacy/SORNsIndex/DODComponentArticleView/tabid/7489/Article/6411/n01 131-1.aspx,
http://dpclo.defense.gov/Privacy/SORNsIndex/DODComponentArticleView/tabid/7489/Article/6410/n01080-3.aspx.

PERSONAL INFORMATION

Name (First, MI, Last) | SSN (last 4) | Phone | Cell Phone

_____ _____ ( ) _____ ( ) _____

Current Mailing Address _____

_____

_____

Name of Parent/Guardian 1 _____

Name of Parent/Guardian 2 _____

Contact Information of Parent/Guardian 1

_____

_____

_____

_____

_____

Contact Information of Parent/Guardian 2

_____

_____

_____

_____

_____

Place of Birth _____

Date of Birth _____

Are you a US Citizen? Yes ☐ No ☐ If naturalized, give date, place, court of jurisdiction, and certificate number. _____

Select Service ☐ Navy ☐ USMC

Military Experience and Training (Past and Present, if any)

Service	Dates of Service	Highest Rank	EAOS	Type of Discharge

Training Program	Position(s) Held	Awards	Grades of Participation			
Select JROTC			9 ☐	10 ☐	11 ☐	12 ☐
Civil Air Patrol			9 ☐	10 ☐	11 ☐	12 ☐
Other (NDCC etc.)			9 ☐	10 ☐	11 ☐	12 ☐

EXTRACURRICULAR ACTIVITIES

READ CAREFULLY: Identify only those activities in which you engaged during school grades 9-12. NROTC is particularly interested in identifying activities in which an applicant has participated involving responsibility and leadership.

Organization	Position(s) Held	Hours/Week	Grades of Participation			
			9 ☐	10 ☐	11 ☐	12 ☐
			9 ☐	10 ☐	11 ☐	12 ☐
			9 ☐	10 ☐	11 ☐	12 ☐
			9 ☐	10 ☐	11 ☐	12 ☐

ATHLETIC ACTIVITIES

READ CAREFULLY: Identify only those sports in which you engaged during school grades 9-12. Mark the year(s) in which you were on the varsity team. If you 'lettered' in the sport list that in the awards. Mark 'JV/Club' if you participated at this level in any year. Do not list intramural activity.

Sport	Position(s) Held	Awards/Recognition	JV/Club	Varsity			
				9 ☐	10 ☐	11 ☐	12 ☐
				9 ☐	10 ☐	11 ☐	12 ☐
				9 ☐	10 ☐	11 ☐	12 ☐

OTHER ACTIVITIES

Attach additional sheets, if needed, to identify other activities not listed above that involve considerable responsibility and leadership. List positions held and the average number of hours devoted per week to the activity.

EMPLOYMENT

List in reverse chronological order, beginning with the most recent, each period of full-time, part-time, or self-employment. List inclusive dates for each period. If discharged for cause from any employment, so state. Include any leadership responsibilities.

Dates From	To	Employer Name and Address	Hours/Week	Type of Work Performed

EDUCATION

List in reverse chronological order beginning with the most recent school attended. Include any/all college work, whether or not a degree was earned. Attach transcripts.

Dates From	To	School Name and Address	Major	Degree

ACADEMICS

PSAT Verbal: Math: _____ High School Name: _____

SAT Verbal: Math: _____ Class Rank: _____ GPA: _____

ACT Verbal: Math: _____ Class Size: _____ GPA Scale: _____

Answer the following questions. If you answer 'Yes', provide explanations on an additional sheet.

	Yes	No
1. Have you ever applied for or signed any agreement concerning any program leading to a commission in any of the Armed Forces of the United States?	☐	☐
(If Yes, list the date, place of application, program applied for and current status of application.)		
2. Have you signed an Enlistment Contract (DD Form 4) with any of the Armed Forces of the United States?	☐	☐
(If 'Yes', list the date, place, service, and current status of enlistment.)		

3. Have you ever been arrested, detained, indicted, summoned into court, or convicted for any violation of civil or military law, including juvenile offenses and moving traffic violations? ☐ ☐

(If 'Yes', give complete description of incident, name and place of court, nature of offense, date, and disposition of the case.)

4. Are you currently awaiting trial or sentencing, on probation, under suspended sentence, or under any other type of military or civilian restraint as a result of violation of law or regulation? ☐ ☐

5. Have you ever been known by any other name or names other than that used in this application? ☐ ☐

(If 'Yes', explain in affidavit form and submit with application, even if differences were only differences in spelling.)

6. Do you have any moral obligations or personal convictions that will prevent you from conscientiously bearing arms and supporting and defending the constitution of the United States against all enemies, foreign and domestic? ☐ ☐

7. Have you ever taken any narcotic, sedative, or tranquilizer drugs other than as prescribed by a physician or dentist? ☐ ☐

(If 'Yes', attach a statement with the full circumstances, number of time used, amounts taken, period over which taken, and intent for further use.)

8. Have you ever been arrested or convicted of trafficking illegal drugs? ☐ ☐

9. Have you ever used LSD, marijuana, sniffed glue or used any other hallucinogens, hypnotic, stimulants, or other known harmful or habit- forming drugs and/or chemicals? ☐ ☐

(If 'Yes', attach a statement with the full circumstances, number of times used, amounts taken, period over which taken, and intent for further use.)

- I certify that all information given by me is complete and correct to the best of my knowledge.
- I understand that this applicant questionnaire does not obligate me in any way, and that I may withdraw my application at any time.
- I understand that I am voluntarily applying for a military training program that may lead to an opportunity for commissioning as an officer in the U.S. Navy or U.S. Marine Corps. While participating in the program, I will be required to adhere to U.S. Navy and/or U.S. Marine Corps regulations as they apply to this program.
- The U.S. Navy and the U.S. Marine Corps have medical and physical qualifications that I must satisfy before I am offered an opportunity to commission.
- By allowing me to participate in the program, neither the U.S. Navy nor the U.S. Marine Corps are making any representations that I will be offered an opportunity for commissioning as an officer.

Signature _____ Date _____

NROTC COLLEGE PROGRAM OATH

I do solemnly swear (or affirm) that I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties of the office on which I am about to enter. So help me God.

Signature _____ Date _____