

**Naval Reserve Officers Training Corps (NROTC)  
New Student Indoctrination (NSI) Information Sheet and Package Checklist**

OMB CONTROL NUMBER: 0703-0026  
OMB EXPIRATION DATE: 01/31/2026

**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](mailto: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 DO NOT RETURN YOUR RESPONSE TO THE EMAIL ADDRESS ABOVE.**

Responses should be sent to:

**Naval Service Training Command**  
Candidate Midshipman Guidance Office (CMGO)  
Building 3, Room 106  
320A Dewey Avenue  
Great Lakes, IL 60088-2911

**PLEASE READ THE FOLLOWING STATEMENT REQUIRED BY THE PRIVACY ACT OF 1974 BEFORE COMPLETING THE APPLICATION.**

**PRIVACY ACT STATEMENT**

**AUTHORITY:** 5 U.S.C. § 301, Departmental Regulations; 10 U.S.C. 2107 (Financial Assistance Program); E.O. 9397 (SSN), and System of Records Notices (SORNs) N01130-1 and N01080-3.

**PURPOSE(S):** To manage and contribute to the recruitment of qualified men and women for officer programs and the regular and reserve components of the Navy. To ensure quality military recruitment and to maintain records pertaining to the applicant's personal profile for purposes of evaluation for fitness for commissioned service. The information you provide will be used to determine whether you qualify, and should be nominated for, an NROTC 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.

**ROUTINE USE(S):** Information provided on the application will be used to screen and select individuals to receive scholarships, maintain data on the scholarship program, compare scholarship applicants from previous or subsequent years, and provide academic data and contact information to Navy activities and admissions officials at colleges and universities 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; the Department of Veterans Affairs and Selective Service Administration in relation to enlistment or reenlistment eligibility; Federal, state or local agencies that maintain civil, criminal and other relevant information pertaining to the letting of contracts; in response to an inquiry from a congressional office of record for an individual; to the Office of Personnel Management (OPM) to carry out legally authorized government-wide personnel management functions and studies; and to the General Services Administration (GSA) for the purposes of records management under the authority of 44 USC § 2904 & 2906. Information provided 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 here. 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:** Voluntary - However, failure to do so may result in our inability to process your application for the NROTC program. Note that the Social Security number (SSN) is required at the time of application to ensure proper identification of the applicant. There are times applicants have the same names, therefore the collection of SSN is required to ensure proper identification.

More information on the SORNS can be found at the following link(s):

[http://dpelo.defense.gov/Privacy/SORNSIndex/DODComponentArticleView/tabid/7489/Article/6411/n01\\_131-1.aspx](http://dpelo.defense.gov/Privacy/SORNSIndex/DODComponentArticleView/tabid/7489/Article/6411/n01_131-1.aspx),  
<http://dpelo.defense.gov/Privacy/SORNSIndex/DODComponentArticleView/tabid/7489/Article/6410/n01080-3.aspx>.

## MIDSHIPMAN CANDIDATE INFORMATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Email Address: \_\_\_\_\_

Social Security Number:

Enter FULL 9 digit number

\_\_\_\_\_

NROTC OPTION: Circle one

Navy

Nurse

Marine Corps

Approved School

or school you plan to attend: \_\_\_\_\_

Date of High School Graduation: \_\_\_\_\_

Do you have any commitments that prevent you from attending any of the NSI training iterations?      Y E S      N O

If YES, for which dates are you unavailable? \_\_\_\_\_

**Initial in each box to certify that the MANDATORY documents listed below are contained within your NSI submission package. Affix this completed page to the top of your submission package, and mail to the address above.**

### INITIALS

### FORMS

NSN-7540-00-634-4120 Federal Health Care Center (FHCC) Registration Form

1533/173 NROTC Standard Release Form

DD Form 2870 Authorization for Disclosure of Medical or Dental Information, Dec 2003

<https://www.esd.whs.mil/Portals/54/Documents/DD/forms/dd/dd2870.pdf>

American Academy of Family Physicians Pre-participation (Sports) Physical Evaluation History AND Physical Examination Forms, 2019 version **(Must use this 4 page document)**

### INITIALS

### VACCINATIONS

One Dose of Quadrivalent Meningococcal Vaccine (for example, meningococcal conjugate vaccine (MCV4)), on or after 16<sup>th</sup> birthday

Two Doses of Mumps, Measles, Rubella (MMR) Vaccine, at least 28 days apart

Two Doses of Varicella (Chicken Pox) Vaccine, or Titer Test from Lab documenting Immunity

One Dose of TDaP (Tetanus, Diphtheria, Pertussis) Vaccine, within the last 10 years

At least one dose of Janssen, or two doses of Pfizer/Moderna COVID-19 Vaccine

Seasonal Influenza Vaccine

### INITIALS

### MEDICAL INFORMATION

Sickle Cell Trait (SCT) test results

List of ALL prescriptions and over-the-counter (OTC) medications

(Also must be included in sports physical)

List of all allergies, reactions, and epinephrine auto-injector use (i.e., EpiPen™)

(Also must be included in sports physical)

Candidate Signature: \_\_\_\_\_ Date: \_\_\_\_\_