**US/UK/GE**

**2012 NCO / OFFICER EXCHANGE APPLICATION**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| State | |  | | | | | | | | | State Priority OML | | | | | | | |  | | |
| Name Last | |  | | | | | | First | | |  | | | | | | | | Middle | |  |
| Rank | |  | | | | | | Last Four Service No | | | | | | | | |  | | | | |
| DOB | |  | | | | | | Place of Birth | | | | | | | | |  | | | | |
| Home Address | | | | | | | | | | | | | | | | | | | | | |
| Home Telephone | | | | | | |  | | | | Mobile Telephone | | | | | | | |  | | |
| AGR or M-Day | | | |  | | | | | | | Fax | |  | | | | | | | | |
| Primary E-Mail Address | | | | | | |  | | | | | | | | | | | | | | |
| Civilian Education | | | | | | | | | | | | | | | | | | | | | |
| Civilian Occupation | | | | |  | | | | | | | | | Work Telephone | | | | | |  | |
| Unit of Assignment | | | | |  | | | | | | | | | | | | | | | | |
| Unit Address | | | | | | | | | | | | | | | | | | | | | |
| Unit Telephone | | |  | | | | | | | | | Unit Fax | | | |  | | | | | |
| Unit E-Mail | | |  | | | | | | | | | | | | | | | | | | |
| Unit POC |  | | | | | | | | Commander’s Name | | | | | | | | |  | | | |
| Male  Female | | | | | | | | | | | | | | | | | | | | | |
| Unit Role | | | | | |  | | | | | | | | | | | | | | | |
| Duty Position | | | | | |  | | | | | | | | | | | | | | | |
| Branch / Primary & Secondary MOS | | | | | | | | | |  | | | | | | | | | | | |
| Type of Security Clearance | | | | | | | | | |  | | | | | | | | | | | |
| Are you a prior exchange participant | | | | | | | | | | Yes  No | | | | | | | | | | | |
| ARNG Units Annual Training Camp Dates | | | | | | | | | |  | | | | | | | | | | | |
| ARNG Units Annual Training Camp Location | | | | | | | | | |  | | | | | | | | | | | |
| Must be able to attend Two Annual Training Periods | | | | | | | | | | | | | | | Yes  No | | | | | | |
| Any period unable to attend UK Annual Training | | | | | | | | | | | | | | |  | | | | | | |
| Language Proficiency (not mandatory) | | | | | | | | | | | | | | |  | | | | | | |
| Past Military Assignments | | | | | | | | | | | | | | | | | | | | | |

CDR’s signature recommending soldier’s participation in the exchange program and certifying soldier meets parameters of AR 600-9, is not on medical profile and successfully passed the APFT.

Signature:       Date: