

RC Soldier Medical Support Center APPLICANT CHECKLIST (ENLISTED)

Rank: _____ Name: _____ Contact #: _____

National Guard State: _____ MOS: _____

Location and Position Applying for: _____

WE ONLY NEED DOCUMENTS THAT ARE ON THIS LIST. PLEASE DO NOT PROVIDE ANY OTHER DOCUMENTS.

___ Commanders Letter of Release. **SOLDIERS SELECTED WILL NOT BE ABLE TO ATTEND DRILL**
Soldiers selected must provide a TAG Release Letter.

___ DA Form 705 (APFT) (Last 3 "For Record" Tests)

___ DA Form 5500/5501 (Army Body Fat Content Worksheet) (if needed)

___ Profile DA form 3349 (if applicable)

___ DA Photo within 12 months (May take personal, full length, picture in Class 'A' uniform with digital camera. However must have white background, and must have date on photo)

___ DA form 2-1 or ERB

___ Last 2 NCOER's (if there is a break in your NCOER's, please write a memo stating why)

___ DA Form 1059 for completion of WLC/ALC/SLC, etc...

___ NGB 23 RPAM Statement within 60 days of application

___ HIPAA Certificate within 60 days of application

___ JPAS Statement to verify Security Clearance

___ Orders

******* SM MUST NOT HAVE MORE THAN 1095 DAYS ADOS IN THE PAST 1460 DAYS**

******* INCOMPLETE PACKETS WILL BE DELETED WITHOUT ACTION OR NOTIFICATION**

Applications must be submitted to manuel.villalba1@us.army.mil. Subject Line should read: RC SMSC Application. Applications received at any other E-Mail address will be deleted without action.