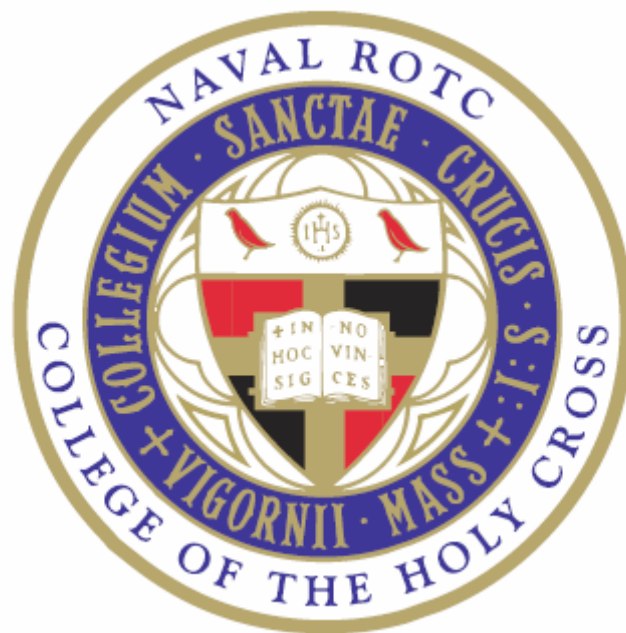


# HOLY CROSS NROTC



## ADMINISTRATIVE INFORMATION FOR COLLEGE PROGRAM STUDENTS

# COLLEGE PROGRAM ADMINISTRATIVE CHECKLIST

Make sure to fill out each form to the best of your ability, and then return the forms via regular mail. Copies of the completed documents should be made for your own records. ***Please return the completed forms and required personal information no later than 10 July.*** If you are **not** planning on participating in NROTC, please contact us immediately at (508) 793-2433 and do not fill out the rest of the paperwork.

**Please refer to the instructions included in this packet.**

## **Forms to be filled out:**

- Authorization for Release of Student Health Information
- Authorization for Release of Student Information (Transcripts)
- Authorization for Release of Student Information (Health)
- Drug and Alcohol Abuse Statement of Understanding (1533/153)
- Drug Statement for NROTC (1533/101)
- Midshipman Background Information Sheet
- Navy/Marine Tattoo Screening Form
- NROTC College Program Application (1533/133)
- Privacy Act Statements (DD 2005)
- Report of Medical History (DD 2807-1)
- Report of Medical Examination
- Report of Dental Examination
- The Concept of Honor
- Uniform Size Sheet
- Midshipman Bio Sheet

## **Required Personal Information:**

- Letter from your doctor stating that you are fit to participate in physical activity (sports physical used for HC/WPI/WSU/Brown is acceptable but must be signed by a DOCTOR)
- Blood Type Identification (Lab Results or Red Cross/Blood Donor card)
- Original or Certified** copy of Birth Certificate (certified with raised seal). **If you prefer not to send the original or certified copy (with raised seal) in the mail, please send us a photo copy and bring the original or certified copy with you on the first day of orientation.**
- Copy of Social Security card with signature (may also be scanned and emailed)
- Copy of vaccination records (may also be faxed directly from your physician to the NROTC Unit)
- Copy of current health insurance card (front and back)
- Copy of prescription insurance card (if you have one)

**Contact the Holy Cross NROTC Unit**

Phone: (508) 793-2433

Fax: (508) 793-2373

Email: [nrotc@holycross.edu](mailto:nrotc@holycross.edu)

Website: <http://www.holycross.edu/nrotc/>

## **Instructions for Administrative Forms**

These forms are required for entry into the NROTC Program at the College of the Holy Cross. The dates on these forms should reflect the first day of class at your respective school.

For completed examples of the following forms see our website

([http://academics.holycross.edu/nrotc/incoming\\_students/admin\\_info\\_college](http://academics.holycross.edu/nrotc/incoming_students/admin_info_college)).

**Please return the completed forms and required personal information no later than 10 July.**

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## **Authorization for Release of Student Information**

### **Authorization for Release of Student Health Information**

- This document authorizes release of your sports physical, held by your school's health service, to the unit.
- Print your first, middle, and last name after "I".
- Sign with full name: first, middle, and last.
- Under signature, write in your Student ID Number and your expected year of graduation.

### **Authorization for Release of Student Information (Transcripts)**

- This document authorizes release of student information (transcripts) from your respective university to the College of the Holy Cross NROTC unit.
  - Print your first, middle and last name after "I".
  - Sign with full name: first, middle and last.
  - Under signature, write in your Student ID Number and your expected year of graduation.
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## **Drug and Alcohol Abuse Statement of Understanding**

- Print your first, middle, and last name.
- Read each section carefully and understand the importance of each statement.
- The Certifying Official and Witness will be completed by NROTC Staff Members

**We will review this document with you to confirm your understanding and certify that your signature is true.**

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### Midshipman Background Information Sheet

- Self-Explanatory
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### Navy Tattoo Screening Form

- Self-explanatory. Date it the first day of class for your respective school.
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### NROTC College Program Application

- Self-explanatory.
  - NOTE: If you have previously filled out the application and submitted it, you do not have to fill it out again.
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### Privacy Act Statement

- Read each section carefully to understand the reasoning for documenting health care.
  - Sign the form with your first, middle, and last name.
  - **Both copies need to be signed and dated (one for health record and one for dental record).**
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### Report of Medical Examination

- Self-explanatory.
  - Must be completed by a Physician.
  - If a physical exam has taken place within the last year then a new exam is not necessary.
  - This form may be faxed to your Physician for completion if necessary.
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### Report of Dental Examination

- Blocks 1 & 2: Self explanatory.
- Blocks 3 - 16: Must be completed by a Dentist.
- If a dental exam has taken place within the last year then a new exam is not necessary.
- This form may be faxed to your Dentist for completion if necessary.

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## **The Concept of Honor**

- Be sure to read and *understand* the significance of this document. Sign your full name: first, middle, and last above “*Signature of midshipman*”.

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## **Bio Sheet**

- This document will be used to brief the Commanding Officer and staff on your background. Use the word document to type up your bio and e-mail it to [nrotc@holycross.edu](mailto:nrotc@holycross.edu).

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## **Uniform Size Sheet**

- Measuring for military uniforms can be very challenging when you are not sure how to measure. The following is provided to assist you in obtaining accurate measurements for your uniforms. We suggest that you utilize a local tailor to ensure accurate measurements.
- Follow the directions provided below when taking measurements:
  1. Head. The measurement is taken by placing the tape around the back of the head meeting at the forehead about one inch below the hairline and one inch above the ears.
  2. Neck. Then measuring for the neck size, place the tape measure around the neck at the collar line with one finger between the tape and the neck.
  3. Chest or Bust. To obtain this size, place the tape over the bulk of the shoulder blades, under the arms and over the fullest part of the chest or bust.
  4. Sleeve. Raise the right arm even with the shoulder with the elbow bent at an angle with the forearm parallel to the floor and palm facing down. Measure from the center of the back and around the bend in the elbow down one inch past the wrist bone.
  5. Waist. The tape should be placed directly over the hipbone to get the best results. If you cannot locate the hipbone, place the tape around the fullest part as close to the top of the waistband as possible.
  6. Hip. The measuring tape should be placed around the largest part of the hip area and across the lower pelvis or fly. (Note: Trousers typically run smaller than normal civilian pants)

7. Inseam. This is not a required measurement, but is used for special ordering of garments. It is measured from the crotch to the heel of the shoe.

8. Outseam. This measurement is taken for determining lengths on trousers and slacks. Place the tape at the top of the hipbone or lower edge of the waistband at the side seam and measure down to the heel of the shoe or the floor if shoes are not worn.

9. Rise. Measure from the center of the crotch (between the legs) up to the waist.