

### III CORPS & FORT HOOD TROOP SCHOOL

(For use of this form, see FH Reg 350-7. The proponent agency is DPTMS.)

#### PRIVACY ACT STATEMENT

**AUTHORITY:** Title 5 USC Section 301; Title 5 USC Section 552a; Privacy Act of 1974; AR 340-21.

**PRINCIPAL PURPOSE:** To request enrollment into III Corps and Fort Hood Troop School courses.

**ROUTINE USES:** Maintain documented requests into III Corps and Fort Hood Troop School courses; place Soldiers and Troop School class enrollment rosters; enroll Soldiers in the Digital Training Management System.

**DISCLOSURE:** Disclosure is voluntary. However, failure to provide the information may result in a delay or error in processing, or may result in incorrect identification in the Digital Training Management System.

#### SECTION I - STUDENT DATA

(CHECK APPROPRIATE BOX)

1. REQUEST FOR  PRIMARY  ALTERNATE SEAT FOR THE CLASS AS INDICATED IN SECTION II BELOW.

2. RANK:	3. LAST NAME:	4. FIRST NAME	5. UNIT:	6. BDE/MSC:
7. SSN	8. PMOS	9. DMOS:	10. DUTY POSITION:	11. ETS DATE:
12. GT SCORE:				

#### SECTION II - COURSE DATA

13. COURSE NUMBER:	14. FY:	15. COURSE TITLE:		
16. COURSE START DATE:		17. COURSE END DATE:		18. COURSE HOURS M/T/W/F: 0900-1730; THUR: 0900-1500
19. BUILDING NUMBER:			20. ROOM NUMBER:	

21. AKO USER NAME REQUIRED FOR DTMS-OV AND XO/S3 COURSE:

22. EMT COURSE SPECIFIC QUESTIONS: (CHECK APPROPRIATE BLOCK)

a) DO YOU HAVE A CURRENT NATIONAL REGISTRY EMT-BASIC (NREMT) CERTIFICATION?  YES  NO EXP. DATE:

DATE CERTIFIED:

b) WERE YOU PREVIOUSLY CERTIFIED AS EMT-B THROUGH THE NATIONAL REGISTRY?  YES  NO EXP. DATE:

c) DO YOU HOLD A CURRENT CPR PROVIDER LEVEL CARD?  YES  NO

#### SECTION III - COMMANDER / FIRST SERGEANT VERIFICATION

23. CDR/1SG INITIALS		THE SOLDIER WAS COUNSELED ON THE REPORTING TIME AND LOCATION AND WILL REPORT AT THE PRESCRIBED TIME WITH ANY REQUIRED EQUIPMENT. THE SOLDIER REMAINS ASSIGNED TO THIS UNIT.
24. CDR/1SG INITIALS		THE SOLDIER IS EXEMPT FROM ALL UNIT DUTIES, DETAILS, AND APPOINTMENTS FOR THE ENTIRE PERIOD OF THE COURSE. CHANGES OR ABSENCE IN ATTENDANCE ARE MADE FOR EMERGENCY REASONS ONLY.
25. CDR/1SG INITIALS		AS AN ALTERNATE, SOLDIER WAS INFORMED HE/SHE MUST REPORT FOR THE CLASS AND THAT HE/SHE MAY BE PLACED IN A PRIMARY SEAT SHOULD A PRIMARY APPLICANT NOT ATTEND THE COURSE. FAILURE TO REPORT AS AN ALTERNATE WILL RESULT AS A REPORTABLE NO-SHOW STATUS.
26. CDR/1SG INITIALS		<input type="checkbox"/> SOLDIER PERSONNEL DATA IS VERIFIED AND THE SOLDIER MEETS ALL PREREQUISITES FOR THE COURSE. OR <input type="checkbox"/> THE SOLDIER REQUIRES A WAIVER FOR: <input type="checkbox"/> RANK <input type="checkbox"/> TIS <input type="checkbox"/> MOS <input type="checkbox"/> DUTY POSITION
27. WAIVER JUSTIFICATION		

28a. CDR OR 1SG NAME:	28b. SIGNATURE:	28c. CDR or 1SG Telephone:
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**SECTION IV - SCHOOLS NCO CHAIN OF FORWARDING**

29. SCHOOLS NCO CHAIN OF FORWARDING:

29a. E-MAIL				
29b. DATE	29c. DISTRIBUTION	29d. UNIT LEVEL	29e. RANK / LAST NAME	29f. TELEPHONE
DATE:	<b>FROM</b>	CO/TRP/BTRY SCHOOLS NCO		
DATE:	<b>THRU</b>	BN/SQDN SCHOOLS NCO		
DATE:	<b>THRU</b>	BDE/REGT SCHOOLS NCO		
DATE:	<b>THRU</b>	MSC (AS REQUIRED)		
DATE:	<b>TO</b>	TROOP SCHOOL		(254) 287-1771