

BSEP Enrollment Guide

BSEP is an on-duty education program designed as a refresher course in Math, Reading and Vocabulary. Many Soldiers take it to raise their GT Score when retesting on the Armed Forces Classification Test (AFCT).

Enrollment & Class Information

In an ENCRYPTED email, YOU THE SOLDIER send Enrollment Memo (see sample below) and DA 4187 (see sample on back, and ERB) to maria.s.stewart.ctr@army.mil to enroll in a BSEP class. Enrollments will be accepted until course is full or the start of the class, whichever comes first.

Due to a change in procedures, Soldiers will report to room 138 to take the TABE on day 1. They will report to the BSEP classroom, room 140 on day 2. Any Soldiers who do not report on time for the TABE will be automatically dropped from the class.

Currently, enrollment is limited to 20 students per class. Enrollment is first come, first serve on or after the registration open date, with appropriate documentation. A mask is mandatory the entire time you are in the building.



CLASS NUMBER	CLASS DATES	AFCT	DONSAS	REGISTRATION OPENS
FY22-3 0900-1200	10 JAN – 9 FEB	10 & 11 FEB	14 & 17 JAN	01 DEC 21
FY22-4 1300-1600	10 JAN – 9 FEB	10 & 11 FEB	14 & 17 JAN	01 DEC 21
FY22-5 0900-1200	14 FEB- 16 MARCH	17 & 22 MARCH	18 & 21 MARCH	01 JAN 22
FY22-6 1300-1600	14 FEB- 16 MARCH	17 & 22 MARCH	18 & 21 MARCH	01 JAN 22
FY22-7 0900-1200	28 MARCH – 27 APRIL	28 & 29 APRIL	15 & 18 APRIL	23 FEB 22
FY22-8 1300-1600	28 MARCH – 27 APRIL	28 & 29 APRIL	15 & 18 APRIL	23 FEB 22

COMMANDER'S MEMO

(Your Unit's Letterhead)

(Your Unit's Office Symbol)

Date

**MEMORANDUM FOR Education Services Division, Directorate of Human Resources,
4300 Camp Hale Road, Fort Drum, NY 13602**

SUBJECT: Basic Skills Education Program (BSEP) Enrollment

1. Request **Rank, Last Name, First Name** be enrolled into BSEP Class Number (**see Class List above for class number**) which runs (**Class Dates**).

Name & DOD ID: _____ Rank/MOS: _____

DOD Email: _____

2. Soldier will be released from all other duties and training that may conflict with the BSEP Class. (**AM Class runs from 0900-1200/PM Class runs 1300-1600 Monday – Friday**). Soldiers will be dismissed if late/absent on first day of class or if they miss six hours of instruction. Duty uniform will be worn.

3. Soldier's 1SG is (**Rank and Name**) and can be reached at (**Phone and email address**).

4. POC is (Rank and Name) at 315 77X-XXXX.

(Digital Signature)
NAME
Rank, Branch
Commanding

PERSONNEL ACTION

For use of this form, see PAM 600-8; the proponent agency is DCS, G-1.

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: Title 10, USC, Section 3013, E.O. 9397 (SSN), as amended
PRINCIPAL PURPOSE: To request or record personnel actions for or by Soldiers in accordance with DA PAM 600-8.
ROUTINE USES: The DoD Blanket Routine Uses that appear at the beginning of the Army's compilation of systems of records may apply to this system.
DISCLOSURE: Voluntary; however failure to provide Social Security Number may result in a delay or error in processing the request for personnel action.

1. THRU (Include ZIP Code) YOUR BDE S-1 BDE ADDRESS	2. TO (Include ZIP Code) APT TEST CONTROL OFFICER ARMY EDUCATION CENTER 4300 CAMP HALE ROAD FORT DRUM NY 13602	3. FROM (Include ZIP Code) COMMANDER YOUR UNIT INFORMATION UNIT POC PHONE NUMBER
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SECTION I - PERSONAL IDENTIFICATION

4. NAME (Last, First, MI)	5. GRADE OR RANK/PMOS/AOC	6. SOCIAL SECURITY NUMBER
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SECTION II - DUTY STATUS CHANGE (AR 600-8-6)

7. The above Soldier's duty status is changed from _____ to _____ effective _____ hours, _____

SECTION III - REQUEST FOR PERSONNEL ACTION

8. I request the following action: (Check as appropriate)

<input type="checkbox"/> Service School (Enl only)	<input type="checkbox"/> Special Forces Training/Assignment	<input type="checkbox"/> Identification Card
<input type="checkbox"/> ROTC or Reserve Component Duty	<input type="checkbox"/> On-the-Job Training (Enl only)	<input type="checkbox"/> Identification Tags
<input type="checkbox"/> Volunteering For Oversea Service	<input type="checkbox"/> Retesting in Army Personnel Tests	<input type="checkbox"/> Separate Rations
<input type="checkbox"/> Ranger Training	<input type="checkbox"/> Reassignment Married Army Couples	<input type="checkbox"/> Leave - Excess/Advance/Outside CONUS
<input type="checkbox"/> Reassignment Extreme Family Problems	<input type="checkbox"/> Reclassification	<input type="checkbox"/> Change of Name/SSN/DOB
<input type="checkbox"/> Exchange Reassignment (Enl only)	<input type="checkbox"/> Officer Candidate School	<input checked="" type="checkbox"/> Other (Specify)
<input type="checkbox"/> Airborne Training	<input type="checkbox"/> Asgmt of Pers with Exceptional Family Members	ARMY PERSONNEL TEST

9. SIGNATURE OF SOLDIER (When required)	10. DATE (YYYYMMDD)
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SECTION IV - REMARKS (Applies to Sections II, III, and V) (Continue on separate sheet)

1. REQUEST TESTING ON THE ARMED FORCES CLASSIFICATION TEST (AFCT).
2. SOLDIER UNDERSTANDS THAT SIGNATURE IN BLOCK 9 CERTIFIES THAT THEY MEET CRITERIA LISTED BELOW AND THAT FALSIFYING THAT INFORMATION IS PUNISHABLE UNDER THE UCMJ.
3. SOLDIER HAS NOT TAKEN THE ASVAB or AFCT IN THE LAST SIX MONTHS (180 DAYS).
4. THE INFORMATION ABOVE HAS BEEN VERIFIED BY THE SOLDIER'S S-1/MILITARY PERSONNEL OFFICE.

SECTION V - CERTIFICATION/APPROVAL/DISAPPROVAL

11. I certify that the duty status change (Section II) or that the request for personnel action (Section III) contained herein -

HAS BEEN VERIFIED
 RECOMMEND APPROVAL
 RECOMMEND DISAPPROVAL
 IS APPROVED
 IS DISAPPROVED

12. COMMANDER/AUTHORIZED REPRESENTATIVE	13. SIGNATURE	14. DATE (YYYYMMDD)
LAST, FIRST, MI, Rank, Commander		