

Instructions for attached Forms

Attached are the basic forms needed to attend any ROTC class. By filling out and turning in these forms, you are not making a commitment, promise, or decision to join the United States Army. Once filled out, these forms will be kept on file for as long as the student consecutively takes ROTC classes. Make sure read each form completely so you understand what you are signing.

Before printing off and signing, the student must fill in all the PDF blocks that require information. Do not try to use digital signature on this packet as those forms will not be accepted. This packet is designed so that you only have to fill in your name and the date once.

- **CC Form 136-R** = Manually sign in black ink.
- **CC Form 137-R** = **Choose either PART I or PART II** Do not sign on both lines. If PART I is chosen, fill in the name of your parents as requested and then manually sign and date in black ink. If PART II is chosen, manually sign and date in black ink.
- **Dental Form** = This form **DOES NOT** require a visit to your dentist. You can look up the information requested, fill it in, print it off, and manually sign and date in black ink.
- **BYU-Idaho Army Consent** = **(Packet)** Manually sign in black ink.
- **CC Form 3425-R** = **This form MUST be completed by a doctor.** Remove this from the back of the packet and take it to your appointment. If the doctor is unsure what type of exam is needed, requests a Sports physical. Make sure the doctor signs and dates the form after the examination.
- **CC Form 139-R** = **(NOT INCLUDED) This form must be filled out in person.** To fill out this form, you must know in advance what your **BLOOD TYPE** (Line # 12) is and your **ACT & SAT score** if you took either of them (Line # 13 & #14).

We will also need a copy, front and back, of your Birth Certificate and Social Security Card. If you are not an American Citizen, we will need a copy of your paperwork that allows you to be in the country.

**BRIEFING ON GOVERNMENT SPONSORED BENEFITS FOR ROTC CADETS
(ROTC Cadet Cmd PAM 145-4)**

**BRIEFING ON GOVERNMENT SPONSORED BENEFITS FOR ROTC
CADETS**

Revision Date: 03/15/23

I have been briefed this date on government-sponsored benefits for ROTC cadets and understand that-

1. Enrolled ROTC cadets and applicants for enrollment who suffer illness/injury as a result of authorized (scheduled and supervised) training, or authorized travel to and from such training, are eligible for compensation through the Department of labor/Department of Veteran Affairs.

2. ROTC cadets may not receive medical coverage and disability benefits from the Department of Labor or the Department of Veteran Affairs for injuries sustained when traveling off-post for personal recreation/activities. It is the responsibility of the individual cadet to obtain adequate or additional insurance to cover themselves for off-post, non-ROTC related activities.

3. ROTC cadets must report any injury/illness sustained while participating in authorized training or authorized travel to and from such training to the battalion commander/PMS or other authorized cadre. Cadets are responsible for submission of claims to the proper department as listed in paragraph 1 above, with the assistance of battalion cadre.

4. Army medical treatment facilities (subject to the availability of space, facilities, and capabilities of the professional staff) are authorized to provide care for injury incurred or disease contracted while attending field training.

5. Injured students who are eligible to receive medical treatment are authorized medical care from the following sources:
 - a. U.S. Public Health Service hospitals or physicians where available.

 - b. Army, Navy, Air Force, or VA medical treatment facilities, subject to the availability of space, facilities, and the capabilities of the professional staff.

DATE

CADET SIGNATURE

Printed Name of Cadet

AUTHORIZATION/DECLINATION FOR ACCESS TO STUDENT RECORDS

For use of this form, see CC Pam 145-4, the proponent agency is ATCC-PC

DATA REQUIRED BY THE PRIVACY ACT OF 1974

Authority 20 USC 1232g, and Public Law 93-380
Principal Purpose To authorize/decline the release of any and all official records maintained by the ROTC Department to personnel in the Department of Defense and/or parents.
Routine Uses To provide authorization/declination to release information contained in official records.
Disclosure Disclosure is voluntary.

PART I - AUTHORIZATION FOR ACCESS TO STUDENT RECORDS

Having been advised of the provisions of Public Law 93-380 (20 USC 1232g, Family Educational Rights and Privacy Act of 1974) and in connection with my participation in the Army ROTC program, I

hereby authorize the release of any and

(Cadet's Name)

all official records maintained by the Brigham Young University - Idaho

(Name of School)

or it's ROTC Department to personnel in the Department of Defense and/or my parents,

(Name of Parents)

I waive any requirement that I be furnished a copy of those records prior to or concurrent with their release. This consent remains effective until my relationship with the ROTC program is terminated.

Signature of Cadet

Date

PART II - DECLINATION OF PARENTAL ACCESS TO STUDENT RECORDS

Although informing my parents of the academic/ROTC progress made by me may assist in my quest to become a commissioned officer, I decline to allow release of official records maintained by

Brigham Young University - Idaho

ROTC Department to my

(Name of School)

parents. *(Exception: Parents who still claim student as a dependent for IRS purposes)*
future, I will inform the ROTC Department in writing.

If I change my mind in the

Signature of Cadet

Date

CC Pam 145-4, para 2-55 **Dental Exam Requirements (revision date Nov 05)**

b. Dental films for casualty identification purposes are required for all participants in the ROTC program who must use government-owned or government contracted transportation. The PMS is to ensure the cadet's dental records contain sufficient documentation to aid in forensic identification.

(1) ROTC Cadets must provide name, address, and phone number of his/her dentist and sign a statement acknowledging that his/her civilian dental records contain descriptive profiles, bite wing x-rays, orthodontic profiles or dental x-rays.

(2) ROTC students not pursuing commissioning credit (ineligibles, academic credit only, etc.) are not permitted to participate in other than classroom activities. However, if these students are transported using government owned or government contracted transportation, they must have a dental record for identification purposes. In such circumstances, these students must provide the name, address, and phone number of his/her dentist and sign a statement acknowledging that his/her civilian dental records contain descriptive profiles, bite wing x-rays, orthodontic profiles or dental x-rays.

c. In addition to the above, DNA is obtained as part of the commissioning physical at LDAC.

Cadet Name: _____ SSN: _____
LAST NAME, First Name, MI

Name of Dentist: _____

Dentist Address: _____

Dentist Phone: _____

“I acknowledge that my dental records contain descriptive profiles, bite wing x-rays, orthodontic profiles or dental x-rays.”

SIGNATURE

DATE

MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION: All data is mandatory. Individuals who do not provide this data will not be allowed to be transported on any government owned or government contracted transportation, no exceptions to this rule are allowed.



CONSENT TO RELEASE STUDENT INFORMATION TO DEPARTMENT OF DEFENSE

Brigham Young University - Idaho ("BYU-Idaho") has entered into contracts with the Department of Army in order to provide a ROTC program at the university. By signing below, you acknowledge that BYU-Idaho has a relationship with the Department of Army.

BYU-Idaho is required to periodically supply the Department of Defense and the Department of the Army with certain information about students enrolled in its ROTC program, including information contained in official school educational records. In addition, BYU-Idaho has a duty to supply to both certain additional information, including a student's status in its ROTC program, dismissal from a BYU-Idaho program, completion of certain components of the program, medical information, as well as BYU-Idaho's knowledge of certain crimes charged or committed while a student is enrolled in its ROTC program, or unethical behavior.

I understand that any such information may be education records and I hereby permit Brigham Young University - Idaho and its ROTC program to release the information, including any education records. I realize that such records may include and not be limited to academic, health and disciplinary records, as well as my social security number for identification/security purposes. I understand this information may be released and viewed by the Department of Defense and the Department of the Army under contract with Brigham Young University - Idaho and/or their personnel. I am allowing this release of my education records for educational and professional purposes in order to prove my qualifications to enter into the applicable program or profession or for other valid educational purposes. There is no time limit on the validity of this consent and release.

By signing below, I acknowledge to having completely read, fully understand the above statements and agree to be bound thereby.

Student Name (Printed)

Date

Student Signature

**MEDICAL FITNESS STATEMENT
FOR ENROLLMENT IN BASIC COURSE, SENIOR ROTC**

For use of this form, see AR 145-1; the proponent agency is ODSCPER

DATE

I have examined _____ and find no medical
(First Name - Middle Initial - Last Name)
condition or physical impairment that precludes his participation in the basic course, Army ROTC, a
program not more physically strenuous than a normal college physical education program.

SIGNATURE OF PHYSICIAN