

**BASIC CHAPLAIN COURSE / OJT / ADT APPLICATION**

RANK \_\_\_\_\_ NAME \_\_\_\_\_ SSN \_\_\_\_\_  
HOME PHONE ( ) \_\_\_\_\_ WORK PHONE ( ) \_\_\_\_\_  
DENOMINATION \_\_\_\_\_ HT \_\_\_\_\_ WT \_\_\_\_\_ GENDER \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
MARITAL STATUS \_\_\_\_\_ NUMBER OF DEPENDENTS \_\_\_\_\_  
PAY ENTRY BASE DATE \_\_\_\_\_ DATE OF RANK \_\_\_\_\_  
PRIOR SERVICE: YES / NO OVER FOUR YEARS OF ENLISTED SERVICE: YES / NO

**OJT ELIGIBILITY REQUIREMENTS**

\_\_\_\_\_ Submit request 45 days in advance. \_\_\_\_\_ OJTs are normally limited to 26 day periods.  
\_\_\_\_\_ Must be a full time seminarian or w/in one year of graduation and not yet ordained. \_\_\_\_\_ Must be w/in HT/WT standard and medically qualified.  
\_\_\_\_\_ Must have completed full basic course.

**You must complete this section or this form will be returned to you!**

**GUIDELINES**

- OJTs granted based on available training days - Normally OJTs will be assigned regionally  
- Rental cars are not authorized

**DUTY CHOICES (Prioritize top three choices)**

\_\_\_\_\_ Marine Corps FMF (possible field environment) \_\_\_\_\_ Marine Corps Base  
\_\_\_\_\_ Naval Mobile Construction Battalion (SEABEES) \_\_\_\_\_ Hospital  
\_\_\_\_\_ Ship / Group / Squadron (possibly underway) \_\_\_\_\_ Naval Base / Station  
\_\_\_\_\_ Training Command (Navy/Marine) \_\_\_\_\_ Basic Chap Course  
\_\_\_\_\_ Other: \_\_\_\_\_

MODE OF TRAVEL: Personal Car / Plane Ticket Airport? \_\_\_\_\_

DATES AVAILABLE FOR OJT/ADT: 1<sup>ST</sup> possible day: \_\_\_\_\_  
Last possible day: \_\_\_\_\_

**COMMENTS**

\_\_\_\_\_  
\_\_\_\_\_

**PRIOR OJTs IN CURRENT FISCAL YEAR**

| LOCATION | FROM / TO DATE |
|----------|----------------|
| _____    | _____          |
| _____    | _____          |
| _____    | _____          |

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
*(VERIFIES THAT YOU MEET ALL ELIGIBILITY REQUIREMENTS AS STATED ABOVE.)*

MAIL/FAX TO: Naval Chaplains School, OTCN Commercial: (401) 841-7912  
NRSE Chaplain Student Unit Toll Free: 1-800-535-9026  
114 Porter Ave. Fax: (401) 841-7045  
Newport, RI 02841-1210