

REQUEST FOR INACTIVE DUTY TRAINING (IDT)

Name: _____
Last/First/Middle Rank

SSN: _____

Current Address: _____

Phone: _____(h)

Phone: _____(w)

Active Duty Command/Readiness Command/Reserve Center closest to your residence:

Unit you are requesting to be assigned to:

Unit point of contact (if known):

Phone No: _____

“I understand that by requesting assignment to perform Inactive Duty Training (IDT/Drills), I am obligating myself to adhere to the assigned drill schedule. I also understand that drills performed are for no pay, but retirement points will be credited. Any IDT and ADT desired will be requested through **NRSE CHAPLAIN OFFICER STUDENT UNIT (RUIC 2525C).**”

Signature

Date

Mail this form to:

Naval Chaplains School, OTCN
NRSE CHAPLAIN OFFICER STUDENT UNIT
114 Porter Avenue
Newport, RI 02841-1210

Phone: (800) 535-9026
(401) 841-7912
DSN 948-7912
Fax: (401) 841-7045