Marine Corps Enlisted Aide Program Questionnaire

**(**FILL IN ALL AREAS THAT ARE BLANK; EVERYTHING ELSE IS FOUND IN OTHER DOCUMENTATIONS NOTED AND ATTACH ANY INFORMATION THAT WILL BE USEFUL)

**FULL NAME:**

**RANK:**

**EDIPI:**

**HOME ADDRESS:**

**WORK ADDRESS:**

**WORK NUMBER:**

**HOME NUMBER:**  **CELL NUMBER:**

**EMAIL ADDRESS:**

**CURRENT DUTY STATION:**

**TIME ON STATION:**

**DATE OF BIRTH:**  **PLACE OF BIRTH:**

**U.S. CITIZEN: YES NO**

**ELIGIBLE FOR SECRET AND TOP SECRET CLEARANCE: YES NO,**

**PLEASE ATTACH THE FOLLOWING PAPER WORK IF IT APPLIES:**

**PAGE 11 & 12, TRAFFIC OFFENCES PENDING, NATURALIZATION PAPERWORK IF APPLIES, COMMANDING OFFICER FINANCIAL WORKSHEET, AA FORM.**

**SPOUSE: DUAL ACTIVE: YES NO N/A**

**NUMBER OF CHILDREN:**

**ELIGIBLE FOR EFMP: YES NO**

**DRIVERS LICENSE: YES NO EXPIRATION:**

**DRIVERS LICENSE#: \*STATE ISSUED:**

**NUMBER OF TATTOOS VISIBLE IN SERVICE C UNIFORM:**

**(IF APPLICABLE, LOCATION AND DISCRIPTION)**

**CULINARY SCHOOLS:**

**AWARDS/CERTIFICATES:**

**PME CERTIFICATES IN GRADE:**

**SECURITY MARINE NET COURSES:**

(PII, INFORMATION AWARENESS, AND CYPERER AWARENESS TRAINING**)** **:**

**ENROLLED IN DTS: YES NO**

**HOLD A GTCC: YES NO**

**HAVE YOU EVER WORKED IN A GENERAL OFFICERS QUARTERS?**

**YES NO**

**\*IF YES:**

**WHERE?**

**WHY DO YOU WANT TO BE A MARINE AIDE?**

**SNCO RECOMMENDATION: YES NO**

**COMMENT:**

**SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE\_\_\_\_\_\_\_\_\_\_**

**PRINT NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE\_\_\_\_\_\_\_\_\_\_\_\_**

**OIC RECOMMENDATION: YES NO**

**COMMENT:**

**SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE\_\_\_\_\_\_\_\_\_\_**

**PRINT SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE\_\_\_\_\_\_\_\_\_\_\_\_**